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FEC FORM 3X

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) 591 REDWOOD HWY., #4000 ADDRESS (number and street) Check if different than previously MILL VALLEY CA 94941 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE A CITY A IS THIS **AMENDED** NEW C00384362 Χ REPORT OR (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 05 0 1 2006 05 3 1 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. JASON D. KAUNE Type or Print Name of Treasurer JASON D. KAUNE Electronically Filed by 06 13 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) D D 0.5 0 1 2006 0.5 3 1 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand [°]2006 225102.30 January 1 (b) Cash on Hand at 270368.70 Begining of Reporting Period 53168.10 200399.50 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 323536.80 425501.80 6(a) and 6(c) for Column B) 59900.00 161865.00 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 263636.80 263636.80 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 1958.50 Schedule C and/or Schedule D) 02 2004 CA This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

> Federal Election Commission 999 E street, NW Washington, DC 20463

> > Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)

0 1 м м 0 5 м м 0 5 3^D1 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 50147.66 153087.40 (i) Itemized (use Schedule A) 2922.84 46913.39 (ii) Unitemized (iii) TOTAL (add 53070.50 200000.79 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 53070.50 200000.79 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 97.60 398.71 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 53168.10 200399.50 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 53168.10 200399.50 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	265.00
	Expenditures(c) Total Operating Expenditures	0.00	200.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	265.00
2.	Transfers to Affiliated/Other Party Committees	0.00	0.00
3.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	20500.00	103500.00
4.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)		
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
7.	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	0.00	
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	39400.00	58100.00
0	Federal Election Activity (2 U.S.C 431(20))		
٥.	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	59900.00	161865.00
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	50000.00	101005.00
	from Line 31)	59900.00	161865.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	53070.50	200000.79
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	53070.50	200000.79
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	265.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	265.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 195			
TEMIZED RECEIPTS			or each category of the	(check only one) X 11a 11b 11c 12			
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$			
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persor ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)						
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)			
۹.	Full Name (Last, First, Middle Initial) LYNETTE Y. SNOW			Date of Receipt			
	Mailing Address 23 CEDAR GATE RD.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
	City	State	Zip Code	Transaction ID: INC:A:23023			
	DARIEN	CT	06820	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		5000.00			
	Name of Employer NONE	Occupation HOMEMA					
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	5000.00				
3.	Full Name (Last, First, Middle Initial) JENNIFER SPIDLE			Date of Receipt			
	Mailing Address 21625 E. MERIWETHER	M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O					
	City	State	Zip Code	Transaction ID: INC:A:23022			
	LIBERTY LAKE	WA	99019	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer MEDCO HEALTH SERVICES	Occupation	NERAL MANAGER	1			
	Receipt For:		Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	500.00				
 D.	Full Name (Last, First, Middle Initial) MR DAVID BAUGH			Date of Receipt			
	Mailing Address 1813 ADONIS AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: INC:A:23719			
	HENDERSON	NV	89074	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MGR BEI	NEFIT DELIVERY SYSTEMS				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	500.00				
S	UBTOTAL of Receipts This Page (optional)			5525.00			
	,						

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 195				
ITEMIZED RECEIPTS			or each category of the	(check only one)			
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	747		
Δr	y information copied from such Reports and Stat	omente may	y not be cold or used by any perso		17		
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)			
<u>/</u>	Full Name (Last, First, Middle Initial)						
A.	MR KENNETH DANIELS			Date of Receipt			
	Mailing Address 2903 CHUKKAR COURT	-		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	1		
	City	State	Zip Code	Transaction ID: INC:A:23595			
	PLANT CITY	FL	33567	Amount of Each Receipt this Period			
	FEC ID number of contributing		00007				
	federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1				
	Receipt For:		Year-to-Date ▼				
	Primary General		E0E 00				
	Other (specify) ▼		525.00				
В.	Full Name (Last, First, Middle Initial) MR WILLIS DINGLE			Date of Receipt			
	Mailing Address 17826 ARBOR GREENE	M M / D D / Y Y Y Y	1				
		05 06 2006					
	City	State	Zip Code	Transaction ID: INC:A:23480			
	TAMPA	FL	33647	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Tederal political committee.						
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation					
		SR DIR F		_			
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼				
	Other (specify)		525.00				
C.	Full Name (Last, First, Middle Initial) MS GEORGIA EDDLEMAN			Date of Receipt			
	Mailing Address 908 EDGEMEER LANE			M M / D D / Y Y Y Y	1		
	0"		7' 0 1	05 06 2006			
City		State TX	Zip Code	Transaction ID: INC:A:23704			
	SOUTHLAKE FEC ID number of contributing federal political committee.		76092	Amount of Each Receipt this Period			
				34.45	,		
Name of Employer MEDCO HEALTH SOLUTIONS		Occupation	2	_			
		VP/GM	ı				
	Receipt For:	Aggregate	e Year-to-Date ▼				
Primary General			723.45				
	Other (specify)		720.10				
					_		
 s	UBTOTAL of Receipts This Page (optional)	84.45					
\vdash							
T	OTAL This Period (last page this line number on	ly))	L			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 195 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO Mailing Address 9 GREEN HILL TRAIL City State Zip Code TROPHY CLUB TX 76262 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Occupation VP/GM Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TRAIL			Date of Receipt M
	City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State NV C Occupation VP/GM		Transaction ID: INC:A:23659 Amount of Each Receipt this Period 15.08
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 316.68	
	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III Mailing Address 1970 WOODLANDS PL City POWELL	State OH	Zip Code 43065	Date of Receipt M M M
	FEC ID number of contributing federal political committee.	C	43065	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP/GM Aggregate	Year-to-Date ▼ 525.00	
SI	JBTOTAL of Receipts This Page (optional)			90.08
T	OTAL This Period (last page this line number on	lv)		

0	CHEDIII E A /EEC Form 2V)			FOR LINE NUMBER: PAGE 9 / 195			
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		(check only one)			
ITEMIZED RECEIPTS		or each category of the		X 11a 11b 11c 12			
			Detailed Summary Page	13 14 15 16 17			
Δr	ny information copied from such Reports and Sta	otomonte may	y not be sold or used by any pers				
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	o solicit contributions from such committee.			
abla	NAME OF COMMITTEE (In Full)						
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt			
	Mailing Address 800 SANDY TRAIL			05 06 2006			
	City	State	Zip Code	Transaction ID: INC:A:23734			
	KELLER	TX	76248	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	C		10.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General			7			
	Other (specify) ▼		210.00				
				-			
В.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III			Date of Receipt			
	Mailing Address 266 BRUSHY CREEK A	M M / D D / Y Y Y Y					
				05 06 2006			
	City	State	Zip Code	Transaction ID: INC:A:23559			
	LAS VEGAS	NV	89148	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	C		28.85			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation					
		DIR OPS		_			
	Receipt For:	Aggregate	e Year-to-Date ▼	_			
	Primary General Other (specify) ▼	' '	375.05				
	☐ Other (specify) ♥	0 0		1			
_	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt			
J .	Mailing Address 8362 GOLDEN PRAIRIE	= DBIVE		M M / D D / Y Y Y Y			
	Maining Address 8502 GOLDEN FRAINIE	DUILE		05 06 2006			
	City	State	Zip Code	Transaction ID: INC:A:23497			
	TAMPA	FL	33647	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	FEC ID number of contributing federal political committee.			25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1				
	Receipt For:	1	e Year-to-Date ▼	\dashv			
	Primary General	, iggrogate	Jul 10 Dullo 🔻	7			
	Other (specify)		485.00				
			1 1 1 1 1 1 1	1			
_				63.85			
Ls	UBTOTAL of Receipts This Page (optional)						
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SCHEDULE A (FEC Form 3X)			11		FOR LINE NUMBER: PAGE 10 / 195					
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		l `—	(check only one)					
			Detailed Summary Page	ı —	11a	11b	Н	11c	$\frac{12}{10}$	
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or	for commercial purposes, other than using the na	solicit co	ontribut	ions fro	m sı	uch con	nmittee).		
\setminus	NAME OF COMMITTEE (In Full)									
	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	a. Medco	o Hea	th PA	C)			
Α.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Da	ate of F	eceipt				
	Mailing Address 5 APPLE ORCHARD RD)			5		6	/ Y	200	
	City	State	Zip Code	Tra	nsacti	on ID:	INC	:A:23	575	
	MOORESTOWN	NJ	08057	Ar	nount o	f Each	Rec	eipt this	Perio	d
	FEC ID number of contributing federal political committee.	C							12.	50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1							
	Receipt For:	Aggregate	e Year-to-Date ▼							
	Primary General Other (specify) ▼		262.50	1						
	Other (specify)	0 0	0 0 0 0 0 0	4						
В.	Full Name (Last, First, Middle Initial) MS MARILYN WOLLETT			Da	ate of F	eceipt				
	Mailing Address 8174 MT AIR PL						^D	/ Y	200	
	City	State	Zip Code	Tra	nsacti	on ID:	INC	:A:23	583	
	COLUMBUS	OH	43235	Ar	nount c	f Each	Rec	eipt this	Perio	d
	FEC ID number of contributing federal political committee.	С							25.	00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation								
	Receipt For:		RM PRACTICE Year-to-Date The state of th							
	Primary General	Aggregate		1						
	Other (specify) ▼		525.00	Ц						
<u> </u>	Full Name (Last, First, Middle Initial) MS LUCILLE ACCETTA			Da	ate of F	eceipt				
	Mailing Address 11 ANDOVER CT) 5		3	/ Y	^y 200	
	City	State	Zip Code	Tra	nsacti	on ID:	INC	:A:23	492	
	CORTLANDT MANOR	NY	10567	Ar	nount c	of Each	Rec	eipt this	Perio	d
	FEC ID number of contributing federal political committee.							25.	00	
	Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR SALES & NATL ACCTS									
	Receipt For:									
	Primary General		275.00							
	Other (specify) ▼			4						
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			-		62.	50

91	CHEDIII E A /EEC Form 2V)			FOR LINE NUMBER: PAGE 11 / 195		
SCHEDULE A (FEC Form 3X)		Use separate schedule(s) (cl		(check only one)		
ITEMIZED RECEIPTS		or each category of the		X 11a 11b 11c 12		
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		
Δη	y information copied from such Reports and Sta	atomonte may	y not be sold or used by any perso			
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO		CTION COMMITTEE (a.k.a	Modes Health BAC)		
	MEDGO HEALTH SOLUTIONS INC. FO	JLI HOAL F	CTION COMMITTEL (a.K.a	. Medco Health FAC)		
<u>/</u>	Full Name (Last, First, Middle Initial)					
A.	MR EDWARD ADAMCIK			Date of Receipt		
	Mailing Address 1021 SUNSET RIDGE			M M / D D / Y Y Y Y		
				05 13 2006		
	City	State	Zip Code	Transaction ID: INC:A:23429		
	BRIDGEWATER	NJ	08807	Amount of Each Receipt this Period		
	FEC ID number of contributing			50.00		
	federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
			RM CONTRACT & CONSUL	TING		
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		550.00	1		
	Other (specify) ▼	1 1	330.00			
ь	Full Name (Last, First, Middle Initial)			Date of Bassist		
О.	MR STEPHEN ADLER	DD		Date of Receipt		
	Mailing Address 139 BELLVALE LAKES	RD		05 13 2006		
	City	State	Zip Code			
	WARWICK	NY	•	Transaction ID: INC:A:23474		
		INT	10990	Amount of Each Receipt this Period		
	FEC ID number of contributing	C		50.00		
	federal political committee.					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1			
	MEDCO HEALTH SOLUTIONS	VP INFO	TECHNOLOGY			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General			1		
	Other (specify) ▼		550.00			
	Full Name (Last, First, Middle Initial)					
C.	MARENE ALLISON			Date of Receipt		
	Mailing Address 4405 WISMER ROAD			05 13 2006		
	011	01-1-	7'- 0-1-			
	City	State	Zip Code	Transaction ID: INC:A:23754		
	DOYLESTOWN	PA	18901	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		35.00		
	federal political committee.	0				
	Name of Employer	Occupation	 1	7		
	Name of Employer MEDCO HEALTH SOLUTIONS		JRITY & ASSET PROTECTI	oh		
Receipt For:		1	Year-to-Date ▼	<u>-</u>		
	Primary General	55. 554.0	=	1		
	Other (specify) ▼		385.00			
				1		
	l					
0	UBTOTAL of Receipts This Page (optional)			135.00		
\vdash	ODITIE OF FIGURE THIS Flage (Optional)					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 195			
ıT	EMIZED RECEIPTS		or each category of the	(check only one)			
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			, ,	13 14 15 16 17			
Ar or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO			Date of Receipt			
	Mailing Address 146 JOHNSON RD			05 13 7 2006			
	City	State	Zip Code	Transaction ID: INC:A:23527			
	SCARSDALE	NY	10583	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	1 TECHNOLOGY				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		075.00				
	Other (specify)	0 0	275.00				
В.	Full Name (Last, First, Middle Initial) TEJWANSH ANAND			Date of Receipt			
	Mailing Address 10 WHIPPOORWILL LA	05 13 7 9 9 9					
	City	State	Zip Code	Transaction ID: INC:A:23730			
	CHAPPAQUA	NY	10514	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General	1 1	550.00	1			
	Other (specify)		550.00				
<u>с.</u>	Full Name (Last, First, Middle Initial) DR ROGER ANDERSON			Date of Receipt			
	Mailing Address 833 OXFORD COURT			05 13 YYYYY 2006			
	City	State	Zip Code	Transaction ID: INC:A:23749			
	LEWISVILLE	TX	75056	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		192.30			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & C	n HIEF PHARMACIST				
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 834.60				
s	UBTOTAL of Receipts This Page (optional)			267.30			

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 13 /	195
	•		Use separate schedule(s) or each category of the	(check only one)	
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12	
			,	13 14 15 16	17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contribution solicit contributions from such committee	IS e.
$\overline{}$	NAME OF COMMITTEE (In Full)		71		
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) MS JAYME ANTONOPLOS			Date of Receipt	
	Mailing Address 417 MILLS COURT			05 / 13 / 200	
	City	State	Zip Code	Transaction ID: INC:A:23594	
	FLORHAM PARK	NJ	07932	Amount of Each Receipt this Period	t
	FEC ID number of contributing federal political committee.	С		25.	00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR EXE			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		275.00		
	Other (specify) ▼		273.00		
3.	Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI			Date of Receipt	
	Mailing Address 20 CHADWELL PLACE	05 13 7 200			
	City	State	Zip Code	Transaction ID: INC:A:23542	
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period	t
	FEC ID number of contributing federal political committee.	С		25.	00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CC			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		275.00		
_	Full Name (Last, First, Middle Initial) MS BECKIE BARATKO			Date of Receipt	
J .	Mailing Address 80 N. WOODLAND STR	CCT		M M / D D / Y Y Y	
				05 13 200	
	City ENGLEWOOD	State NJ	Zip Code 07631	Transaction ID: INC:A:23674 Amount of Each Receipt this Period	٠
	FEC ID number of contributing		07001		
	federal political committee.	C		25.	00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROF	n POSAL UNIT		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		275.00		
	Other (specify) ▼				
s	UBTOTAL of Receipts This Page (optional)			75.	00
T-	OTAL This Period (last page this line number on	ılv)			
•		· y / · · · · · · · · · · · · · · · · · ·	······································		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 195
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar	y information copied from such Reports and Stat- for commercial purposes, other than using the na	ements may	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR THOMAS BARATTA Mailing Address 69 SKYLINE DR			Date of Receipt
	City	State	Zip Code	0 5 1 3 2 0 0 6 Transaction ID: INC:A:23606
	UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	C	07458	Amount of Each Receipt this Period 30.00
	Name of Employer MEDCO HEALTH SOLUTIONS		TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00	
В.	Full Name (Last, First, Middle Initial) MR MICHAEL BARONE Mailing Address 452 MEDWAY RD			Date of Receipt 0 5 1 3 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:23759
	HIGHLAND HEIGHTS	OH	44143	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	L MGR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2750.00	
С.	Full Name (Last, First, Middle Initial) MRS BRENDA BASSETT			Date of Receipt
Mailing Address 1752 BLACKSTONE DRIVE			7.0	05 13 2006
MEDOO HE'ALTH COLUTIONS I '			Zip Code 75007	Transaction ID: INC:A:23673 Amount of Each Receipt this Period
		C		50.00
		Occupation VP NATL		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
s	UBTOTAL of Receipts This Page (optional)			330.00
T.	OTAL This Period (last page this line number on	lv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 195 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR DAVID BAUGH Mailing Address 1813 ADONIS AVE City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		Zip Code 89074 n NEFIT DELIVERY SYSTEMS	Date of Receipt M M D D Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼		500.00	
3.	Full Name (Last, First, Middle Initial) MS PATRICE BAVARO Mailing Address 9933 TOLEDO DRIVE N City	ORTH State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	BROOKLYN PARK FEC ID number of contributing federal political committee.	MN C	55443	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		MEDICARE OPS e Year-to-Date ▼ 275.00	
) .	Full Name (Last, First, Middle Initial) MR PETER BEGANS Mailing Address 1605 CHARNITA CT			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City VIENNA FEC ID number of contributing federal political committee.	State VA	Zip Code 22182	Transaction ID: INC:A:23569 Amount of Each Receipt this Period 100.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		ERNMENT AFFAIRS Year-to-Date ▼ 1100.00	
s	UBTOTAL of Receipts This Page (optional)		·····	150.00
т	OTAL This Period (last page this line number on	lv)		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 16 / 195 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	ly information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR STEPHEN BELL			Date of Receipt
	Mailing Address 24 GLENWOOD ROAD			05 13 2006
	City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC:A:23733 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07430	50.00
		Occupation VP FINAL	NCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
3.	Full Name (Last, First, Middle Initial) MR ROBERT BENSON			Date of Receipt
	Mailing Address 304 BERKSHIRE AVE			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City NEW MILFORD	State NJ	Zip Code 07646	Transaction ID: INC:A:23604 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENE	n EFIT DELIVERY SYSTEMS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
) .	Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS			Date of Receipt
	Mailing Address 4273 BROGDAN FARM (COURT		05 13 YYYYY 2006
MEDCO HEALTH SOLUTIONS TECHNI			Zip Code 30518	Transaction ID: INC:A:23616 Amount of Each Receipt this Period
		С		25.00
			CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)			125.00
	<u>`</u>			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) BRYAN BIRCH			Date of Receipt
	Mailing Address 4 WINDRUSH LANE			05 13 2006
	City WESTPORT	State CT	Zip Code 06880	Transaction ID: INC:A:23728 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS		PRES, EMPLOYER GROUP	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2112.00	
3.	Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN			Date of Receipt
	Mailing Address 50 NEW ENGLAND DR	05 / 13 / 2006		
	City	State N. I	Zip Code 07446	Transaction ID: INC:A:23556
	RAMSEY NJ FEC ID number of contributing federal political committee.		07440	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CLIENT & MKT PROG STRA	<u></u>
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
- .	Full Name (Last, First, Middle Initial) MR KENNETH BODMER			Date of Receipt
	Mailing Address 15 WEISS DR			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City TOWACO	State NJ	Zip Code 07082	Transaction ID: INC:A:23646 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07002	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		VP FINANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
s	UBTOTAL of Receipts This Page (optional)			267.00
T	OTAL This Period (last page this line number on	v)	-	

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 195			
	ITEMIZED RECEIPTS		or each category of the	(check only one)			
•••	LIMIZED RECEIP 13	Detailed Summary Page		X 11a 11b 11c 12			
				13 14 15 16 17			
Ar	y information copied from such Reports and State for commercial purposes, other than using the nan	ments may ne and add	not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)		71				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. POL	ITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)			
\angle			,	<u>,</u>			
_	Full Name (Last, First, Middle Initial)			B			
Α.	MR MICHAEL BOGDA			Date of Receipt			
	Mailing Address 80 LEONA CT			05 13 2006			
	City	State	Zip Code	Transaction ID: INC:A:23722			
	LEVITTOWN	NY	11756	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	C		25.00			
	Name of Employer	Couration		_			
	MEDCO HE'ALTH SOLLITIONS	Occupatior	CAL SPECIALIST				
			Year-to-Date ▼				
	Primary General			1			
	Other (specify) ▼		275.00				
В.	Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA			Date of Receipt			
Ь.	Mailing Address 109 ARBOR PL			M M / D D / Y Y Y Y			
	Walling Address 109 ANDON FL			05 13 2006			
	City	State	Zip Code	Transaction ID: INC:A:23461			
	BRYN MAWR	PA	19010	Amount of Each Receipt this Period			
	FEC ID number of contributing			25.00			
	federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	_			
	MEDCO HEALTH SOLUTIONS	VP SALE					
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General		275.00	1			
	Other (specify) 🔻	0 0	273.00				
_	Full Name (Last First Middle Initial)						
C.	Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN			Date of Receipt			
	Mailing Address 5259 FISHERCREST LN			M M / D D / Y Y Y Y			
				05 13 2006			
	City	State	Zip Code	Transaction ID: INC:A:23679			
	RICHMOND	VA	23231	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	rederai politicai committee.						
	MEDOO HE'XI TH SOLLITIONS	Occupation					
			MULARY CONSULTING				
		Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼			2200.00				
	Calc. (opcon)) \	0 0		1			
s	UBTOTAL of Receipts This Page (optional)	250.00					
۲	, J- (-p,						
lτ	OTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 19 / 195		
	•		Use separate schedule(s)	check only one)		
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12		
			Detailed Guillinary Fage	13 14 15 16 17		
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any personal	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the r	solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)		ACTION COMMITTEE (- I	. Mandan Handah DAO)		
\angle	MEDCO HEALTH SOLUTIONS INC. PO	JLITICAL F	ACTION COMMITTEE (a.K.a	i. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN			Date of Receipt		
	Mailing Address 15 DAWN LANE			05 13 2006		
	City	State	Zip Code	Transaction ID: INC:A:23716		
	RINGWOOD	NJ	07456	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		30.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1 HLTH MGMT	7		
	Receipt For:		Year-to-Date V	\dashv		
	Primary General	riggrogato	Tour to Bute V	1		
	Other (specify) ▼		330.00			
				"		
В.	Full Name (Last, First, Middle Initial) MS PATRICIA BRANUM			Date of Receipt		
	Mailing Address 210 FROG HOLLOW R	M M / D D / Y Y Y Y				
	PO BOX 708			05 13 2006		
	City	State	Zip Code	Transaction ID: INC:A:23669		
	COATESVILLE	PA	19320	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		75.00		
	federal political committee.					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	า	7		
			& PROCESS ENGINEERIN	1G		
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify)		650.00	1		
	Other (specify)	0 0		1		
<u> </u>	Full Name (Last, First, Middle Initial) MR DAVID BREEN			Date of Receipt		
٠.	Mailing Address 27 SEALS DR			M M / D D / Y Y Y Y		
				05 13 2006		
	City	State	Zip Code	Transaction ID: INC:A:23647		
	MONROE	NY	10950	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANA	1 LYTICAL SVCS			
Receipt For:			Year-to-Date ▼	7		
	Primary General	00 0		7		
	Other (specify) ▼		275.00			
				100.00		
s	UBTOTAL of Receipts This Page (optional)			130.00		
				-		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 195
IT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR KENNETH BROWN			Date of Receipt
	Mailing Address 540 GIORDANO DRIVE		7: 0 1	05 13 2006
	YORKTOWN HEIGHTS	State NY	Zip Code 10598	Transaction ID: INC:A:23458
			10598	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS REQUIREMENTS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
3.	Full Name (Last, First, Middle Initial) MS VIVIAN BULGER			Date of Receipt
	Mailing Address 120 EAST MAIN ST	05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:23645
	WASHINGTONVILLE	NY	10992	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	FINANCE	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		220.00	
	Full Name (Last, First, Middle Initial) MR KEVIN BURON			Date of Receipt
Mailing Address 301 TEMPLETON CT				05 13 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23545
	GRANITE BAY	CA	95746	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
		Occupation VP SALE		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)			95.00
т.	OTAL This Period (last page this line number on	v)		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 21 / 195	5
	•		Use separate schedule(s)	(check only one)	
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12	
			Detailed Guillinary Fage	13 14 15 16	17
An	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	n for the purpose of soliciting contributions	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.	
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
_			`		
	Full Name (Last, First, Middle Initial)				
۹.	MRS PEGEEN BUTTERFIELD			Date of Receipt	
	Mailing Address 23 NUTTING PLACE			05 13 2006	
	011	01-1-	7'- 0-1-		
	City	State	Zip Code	Transaction ID: INC:A:23482	
	WEST CALDWELL	NJ	07006	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		25.00	
	federal political committee.				
	Name of Employer	Occupation	า	┪	
	Name of Employer MEDCO HEALTH SOLUTIONS		MEMBER STRATEGY		
	Receipt For:		Year-to-Date ▼		
	Primary General	7.99.094.0			
	Other (specify)		275.00		
			0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)				
3.	MRS DOREEN CALDER			Date of Receipt	
	Mailing Address 441 S ELM STREET			M M / D D / Y Y Y Y	
				05 13 2006	
	City	State	Zip Code	Transaction ID: INC:A:23415	
	MAYWOOD	NJ	07607	Amount of Each Receipt this Period	
	FEC ID number of contributing		* * * * * *	10.00	
	federal political committee.	C		40.00	
		10 "		_	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
		-	INESS REQUIREMENTS	_	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		440.00		
	Citiei (specify)		0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)			+	
Э.	MR RAYMOND CARLUCCI			Date of Receipt	
	Mailing Address 24 SHERI DRIVE			M M / D D / Y Y Y Y	
	5 21 61 12 11 13 11 1 2			05 13 2006	
	City	State	Zip Code	Transaction ID: INC:A:23639	
	ALLENDALE	NJ	07401	Amount of Each Receipt this Period	
	FEC ID number of contributing				
	federal political committee.	C		52.50	.
		10			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
Receipt For: Agg			L MGR GROUP	-	
		Aggregate	Year-to-Date ▼	. [
	Primary General		577.50		
	Other (specify) ▼			1	
				117.50	
s	UBTOTAL of Receipts This Page (optional)		······	117.30	
T	OTAL This Period (last page this line number o	nlv)			

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SCHEDULE A (FEC Form 3X)		Use separate so	shedule(s)	FOR LINE NUMBER: PAGE 22 / 195			
ITEMIZED RECEIPTS		or each category		(check only one)			
TI LIVIIZED TIEGEII TO		Detailed Summa	ary Page	X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may	not be sold or use	d by any persor	n for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)	name and add	dices of any pointed		Solidi Contributions from Such Committee.			
MEDCO HEALTH SOLUTIONS INC. P	POLITICAL A	ACTION COMMI	TTEE (a.k.a.	Medco Health PAC)			
Full Name (Last, First, Middle Initial) A. MS MARY CASALE				Date of Receipt			
Mailing Address 822 CEDAR AVE				05 13 7 2006			
City	State	Zip Code		Transaction ID: INC:A:23548			
HADDENFIELD	NJ	08033		Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C			25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE			_			
Receipt For:	Aggregate	e Year-to-Date ▼					
Primary General Other (specify) ▼	0 0	0 0 0 0	275.00				
Full Name (Last, First, Middle Initial) B. MS KAREN CATHCART RUSSELL				Date of Receipt			
Mailing Address 148 CLUBHOUSE DR							
City	State	Zip Code		Transaction ID: INC:A:23432			
WEST COLUMBIA	SC	29172		Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C			25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n CLINICAL SVCS					
Receipt For:	Aggregate	e Year-to-Date ▼					
Primary General Other (specify) ▼	0 0		215.00				
Full Name (Last, First, Middle Initial) C. MR JOSEPH CONOSHENTI, JR				Date of Receipt			
Mailing Address 5 MAGNOLIA DRIVE				05 13 7 9 9 9			
City	State	Zip Code		Transaction ID: INC:A:23438			
MARLBORO	NJ	07746		Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C			25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	DUR					
Receipt For:	Aggregate	e Year-to-Date ▼					
Primary General Other (specify) ▼		0 0 0 0	275.00				
SUBTOTAL of Receipts This Page (optional)				75.00			

TOTAL This Period (last page this line number only)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE			Date of Receipt
	Mailing Address 130 WEST 67TH STREE		7: 0 1	05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City NEW YORK	State NY	Zip Code 10023	Transaction ID: INC:A:23742 Amount of Each Receipt this Period
	FEC ID number of contributing		10025	
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS PLANNING & DE	V
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
3.	Full Name (Last, First, Middle Initial) MR ROBERT COOK			Date of Receipt
	Mailing Address 270 S FRANKLIN TURNI	05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:23452
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HLTI	n H CARE OPS-TECHNOLOG	Y
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		275.00	
D.	Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN			Date of Receipt
	Mailing Address 25 FAIRWAY TRAIL			05 13 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23528
	SPARTA	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
MEDCO HEALTH SOLLITIONS		Occupation VP PHAF	n RMACY NETWORK MGMT	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		275.00	
s	UBTOTAL of Receipts This Page (optional)			75.00
	OTAL This Period (last page this line number on			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 24 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MS ROSELIN DANIEL			Date of Receipt
	Mailing Address 17 DEVONSHIRE DRIVE			05 13 2006
	City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC:A:23620 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		BENEFIT DELIVERY SYS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
3.	Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
	Mailing Address 2903 CHUKKAR COURT	05 13 2006		
	City PLANT CITY	State FL	Zip Code 33567	Transaction ID: INC:A:23596 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33307	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:		e Year-to-Date ▼	1
	Primary General Other (specify) ▼		525.00	
	Full Name (Last, First, Middle Initial) MS MARY DASCHNER			Date of Receipt
	Mailing Address 2926 EWING AVE S			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23508
	MINNEAPOLIS	MN	55416	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
MEDOO HE'ALTH COLLITIONS		Occupation SVP & G	n ENERAL MGR MEDICARE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2115.30	
s	UBTOTAL of Receipts This Page (optional)			242.30
т.	OTAL This Period (last page this line number onl	v)		

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 195	
	EMIZED RECEIPTS	or each category of the		(check only one)	
•••	LIMIZED RECEIP 13	Detailed Summary Page		X 11a 11b 11c 12	
			and be add as and become	13 14 15 16 17	
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
\angle			· 		
Α.	Full Name (Last, First, Middle Initial) A. MRS EDITH DAVIS			Date of Receipt	
Λ.	Mailing Address 386 WHITTIER AVENUE			M M / D D / Y Y Y Y	
	OGG WITH TIETT/WEIVOI	_		05 13 2006	
	City	State	Zip Code	Transaction ID: INC:A:23568	
	DUNELLEN	NJ	08812	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		25.00	
	federal political committee.				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1		
	MEDCO HEALTH SOLUTIONS	SR DIR F	I R		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General	1	275.00		
	Other (specify)	0 0			
_	Full Name (Last, First, Middle Initial)				
В.				Date of Receipt	
	Mailing Address 402 HIGHLAND AVE			M M / D D / Y Y Y Y	
	City	State	Zip Code	05 13 2006	
	City RIDGEWOOD	NJ	07450	Transaction ID: INC:A:23640 Amount of Each Receipt this Period	
			07430		
	FEC ID number of contributing federal political committee.	C		50.00	
	N. (5.1			_	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRIC			
	Receipt For:	ļ	Year-to-Date ▼		
	Primary General	00 0		1	
	Other (specify)		550.00		
_					
C.	Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS			Date of Receipt	
-	Mailing Address W62 N1032 FAIRHAVEI	N CT		M M / D D / Y Y Y Y	
				05 13 2006	
	City	State	Zip Code	Transaction ID: INC:A:23570	
	CEDARBURG	WI	53012	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
	Receipt For:	DIR ACC	Year-to-Date V	_	
	Primary General	Aygregate	rear-to-date V	1	
Other (specify)			275.00		
				100.00	
s	UBTOTAL of Receipts This Page (optional)			100.00	
1 T	OTAL This Period (last page this line number or	1IV)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 26 / 195 (check only one)
•	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI			
۹.	Full Name (Last, First, Middle Initial) MR PAUL DENIS			Date of Receipt
	Mailing Address 101 HALIFAX ROAD			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC:A:23655 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07400	100.00
	Name of Employer MEDCO HEALTH SOLUTIONS		TRACT ADMINISTRATOR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
3.	Full Name (Last, First, Middle Initial) MS KAREN DEZEARN			Date of Receipt
	Mailing Address 3625 PATTERSTONE DF	3		05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ALPHARETTA	State GA	Zip Code 30022	Transaction ID: INC:A:23434 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	25.00
	MEDOO HE'ALTH SOLLITIONS	Occupation SR NATL	ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
<u> </u>	Full Name (Last, First, Middle Initial) MR WILLIS DINGLE			Date of Receipt
Mailing Address 17826 ARBOR GREENE DR				05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City TAMPA	State FL	Zip Code 33647	Transaction ID: INC:A:23481 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	MEDCO HEALTH SOLLITIONS	Occupation SR DIR H		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		525.00	
s	UBTOTAL of Receipts This Page (optional)			150.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 27 / 195		
	ITEMIZED RECEIPTS		or each category of the	(check only one)	1 –	
••	LIMIZED REGEN 10		Detailed Summary Page	X 11a 11b 13 14	11c 12 15 16 17	
Ar	ny information copied from such Reports and S	tatements may	not be sold or used by any perso	on for the purpose of solici	tina contributions	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from	such committee.	
\setminus	NAME OF COMMITTEE (In Full)					
\angle	MEDCO HEALTH SOLUTIONS INC. F	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR ROBERT DOLAN			Date of Receipt		
Λ.	Mailing Address 9 CRANE AVENUE			M M / D D	/ Y Y Y Y Y	
				05 13	2006	
	City	State	Zip Code	Transaction ID: IN		
	WEST CALDWELL	NJ	07006	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing federal political committee.	C			25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BEN	n IEFIT DELIVERY SYSTEMS			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		275.00	1		
	Other (specify)		0 0 0 0 0 0 0	1		
В.	Full Name (Last, First, Middle Initial) MS MERIDITH DORNER			Date of Receipt		
	Mailing Address 4448 CREEK ROAD		0 5 1 3	2006		
	City	State	Zip Code	Transaction ID: IN	C:A:23444	
	ALLENTOWN	PA	18104	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing federal political committee.	C			25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		275.00	1		
	Other (specify) ▼	0 0				
C.	Full Name (Last, First, Middle Initial) MR H.RONALD DRIZIN			Date of Receipt		
Ο.	Mailing Address 17 DAYBREAK			M M / D D	/ Y 'Y 'Y 'Y	
				05 13	2006	
	City	State	Zip Code	Transaction ID: IN		
	IRVINE	CA	92614	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing federal political committee.	C			50.00	
			TRACT ADMINISTRATOR			
			e Year-to-Date ▼	.		
			550.00			
_				<u> </u>		
s	UBTOTAL of Receipts This Page (optional)				100.00	
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TOTAL This Period (last page this line number only)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and ado	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI			
۹.	Full Name (Last, First, Middle Initial) MICHEL DUFRESNE			Date of Receipt
	Mailing Address 58 INDEPENDENCE WA	Y		05 13 YYYYY 2006
	City MORRIS TWP	State NJ	Zip Code 07960	Transaction ID: INC:A:23736 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	192.30
	Name of Employer MEDCO HEALTH SOLUTIONS		TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	
3.	Full Name (Last, First, Middle Initial) MR DANA DUNCAN			Date of Receipt
	Mailing Address 72 HALLEY DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City POMONA	State NY	Zip Code 10970	Transaction ID: INC:A:23551
	FEC ID number of contributing federal political committee.	C	10970	Amount of Each Receipt this Period 25.00
	MEDOO HE'AI TH SOLLITIONS	Occupation DIR ENG	INEERING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
).	Full Name (Last, First, Middle Initial) MR YAACOV DUSHEK			Date of Receipt
	Mailing Address 312 MEGAN CT			05 13 YYYYY 2006
	City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC:A:23611 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	MEDCO HEALTH SOLUTIONS		BENEFIT DELIVERY SYS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)			242.30
	<u> </u>		<u>·</u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 195 (check only one) X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MS GEORGIA EDDLEMAN Mailing Address 908 EDGEMEER LANE			Date of Receipt
				05 13 2006
	City SOUTHLAKE	State TX	Zip Code 76092	Transaction ID: INC:A:23705 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	7 0002	34.45
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 723.45	
3.	Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS			Date of Receipt
	Mailing Address 109 KAREN PLACE	05 13 2006		
	City	State	Zip Code	Transaction ID: INC:A:23457
	WYCKOFF FEC ID number of contributing federal political committee.	C	07481	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
) .	Full Name (Last, First, Middle Initial) MR EDWARD EISENBERG, MD			Date of Receipt
	Mailing Address 128 SUMMIT AVENUE			05 13 7 2006
	City UPPER MONTCLAIR	State NJ	Zip Code 07043	Transaction ID: INC:A:23748
	FEC ID number of contributing federal political committee.	C	07045	Amount of Each Receipt this Period 40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP UTILI	n ZATION MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 425.00	
s	UBTOTAL of Receipts This Page (optional)	99.45		
T	OTAL This Period (last page this line number on	lv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR FREDERICK ELSTON Mailing Address 106 GRAHAM TERRACE			Date of Receipt
			7'- 0-1-	05 13 2006
	City SADDLE BROOK	State NJ	Zip Code 07663	Transaction ID: INC:A:23613 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
3.	Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN			Date of Receipt
	Mailing Address 359 LONG HILL ROAD E	05 13 2006		
	City	State	Zip Code	Transaction ID: INC:A:23752
	BRIARCLIFF MANOR FEC ID number of contributing federal political committee.	C	10510	Amount of Each Receipt this Period 40.00
	Name of Employer MEDCO HEALTH SOLUTIONS		PCOMMUNICATIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00	
- C.	Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN			Date of Receipt
	Mailing Address 75 TWEED BLVD			05 13 2006
	City UPPER GRANDVIEW	State NY	Zip Code 10960	Transaction ID: INC:A:23409
	FEC ID number of contributing federal political committee.	C	10900	Amount of Each Receipt this Period 120.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CMO SV	n P MEDICAL&ANLYTC AFFF	- s
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1320.00	
s	UBTOTAL of Receipts This Page (optional)			185.00
T	OTAL This Period (last page this line number onl	v)		

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 31 / 195
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	ly information copied from such Reports and Sta for commercial purposes, other than using the n	itements may same and add	not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u></u>	NAME OF COMMITTEE (In Full)		are or any point our committee to	
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DITICAL A	ACTION COMMITTEE (a k a	Medco Health PAC)
	MESOS HEALTH SOLOTIONS INC. I C) LI I I O I I I	to front oommin file (a.m.a.	medet Health Frey
_	Full Name (Last, First, Middle Initial)			
A.	MR YAKOV ESTERLIS			Date of Receipt
	Mailing Address 25 STONEHEDGE DR			05 13 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23707
	WEST NYACK	NY	10994	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer	Occupation	<u> </u>	-
	Name of Employer MEDCO HEALTH SOLUTIONS		BENEFIT DELIVERY SYS	
	Receipt For:		e Year-to-Date ▼	
	Primary General		075.00	
	Other (specify)		275.00	
В.	Full Name (Last, First, Middle Initial) MR EDWARD FARGIS			Date of Receipt
٠.	Mailing Address 216 ELMWOOD AVENU	JF		M M / D D / Y Y Y Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23729
	HO-HO-KUS	NJ	07423	Amount of Each Receipt this Period
	FEC ID number of contributing	C		25.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	
		COUNSE		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		275.00	
	Carior (openity)			
_	Full Name (Last, First, Middle Initial)			
C.	DR RICHARD FEIFER			Date of Receipt
	Mailing Address 32 EILEEN DR			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23513
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	Name of Employer	Occupation	<u> </u>	-
	Name of Employer MEDCO HEALTH SOLUTIONS		ICAL SVCS	
	Receipt For:	1	e Year-to-Date ▼	1
	Primary General		550.00	
	Other (specify) ▼		550.00	
				<u> </u>
_	IIDTOTAL of Docciete This David (anticard)			100.00
\vdash	UBTOTAL of Receipts This Page (optional)		······	
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 32 / 195
	EMIZED RECEIPTS		or each category of the	(check only one)	7 C
••	EMIZED REGEII 10		Detailed Summary Page	X 11a 11b 13 14	11c 12 15 16 17
Ar	ny information copied from such Reports and Sta	tements may	not be sold or used by any perso		
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from	such committee.
\setminus	NAME OF COMMITTEE (In Full)				
	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
^	Full Name (Last, First, Middle Initial)			Date of Receipt	
Α.	MR THOMAS FEITEL Mailing Address 58 APPLE HILL DR			-	/ Y Y Y Y
	Maining Address So All I EL THEE BIT			05 13	
	City	State	Zip Code	Transaction ID: IN	IC:A:23546
	GILLETTE	NJ	07933	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			192.23
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP COI	n RP MKTG & E-COMM		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	1	2114.53	1	
	Other (specify)				
В.	Full Name (Last, First, Middle Initial) MR EDWARD FERACA			Date of Receipt	
	Mailing Address 929 CANDLEWOOD LA	KE ROAD	SOUTH	05 / 13	
	City	State	Zip Code	Transaction ID: IN	IC:A:23612
	NEW MILFORD	CT	06776	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R E-COMM STRAT & DELIV	/	
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	' '	250.00	1	
	Other (specify)			J.	
<u> </u>	Full Name (Last, First, Middle Initial) MR THOMAS FERRAZZANO			Date of Receipt	
U.	Mailing Address 138 HEIGHTS ROAD			M M / D D	/ Y Y Y Y
				05 13	
	City	State	Zip Code	Transaction ID: IN	IC:A:23641
	RIDGEWOOD	NJ	07450	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		275.00		
				1	
s	UBTOTAL of Receipts This Page (optional)				242.23
				-	
T	OTAL This Period (last page this line number or	nly)			

SCHEDULE A (FEC Form 3X)	Lie	e separate schedule(s)	FOR LINE NUMBER: PAGE 33 / 195
TEMIZED RECEIPTS	or e	each category of the \	(check only one) X 11a 11b 11c 12
		tailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	ements may not be ame and address o	e sold or used by any perso of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. PO	LITICAL ACTIO	ON COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) A. MR EDWARD FISCHER			Date of Receipt
Mailing Address 465 OLD STONE RD			05 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Z	ip Code	Transaction ID: INC:A:23503
RIDGEWOOD	NJ 0	7450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MEDICARE	E OPS	
Receipt For:	Aggregate Year-	to-Date ▼	
Primary General Other (specify) ▼		275.00	
Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS			Date of Receipt
Mailing Address 1933 MT. OLIVE AGOSTA ROAD			05 13 7 2006
City		ip Code	Transaction ID: INC:A:23587
NEW BLOOMINGTON	OH 4	3341	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR HLTH	CARE OPS	
Receipt For:	Aggregate Year-	to-Date ▼	
Primary General Other (specify) ▼		275.00	
Full Name (Last, First, Middle Initial) MR KEVIN FRANCO			Date of Receipt
Mailing Address 140 BELLAIR RD UNIT Q			05 / 13 / Y Y Y Y Y Y
City		ip Code	Transaction ID: INC:A:23656
RIDGEWOOD	NJ 0	7450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE		
Receipt For:	Aggregate Year-	to-Date ▼	
Primary General Other (specify) ▼		220.00	
SUBTOTAL of Receipts This Page (optional))	70.00
TOTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X)			l la a agravata a abadula(a)	FOR LINE NUMBER: PAGE 34 / 195
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIP 15		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any perso	n for the purpose of soliciting contributions
<u>Ö.</u>	NAME OF COMMITTEE (In Full)	arric arra aac	areas or any political committee to	Solidit Contributions from Such Committee.
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a k a	Medco Health PAC)
	WEDGO FIERETTI GOLOTIONO INO. I	JEITIONE 7	to non oommin tee (a.i.a	. Medee Health 1 7.0)
_	Full Name (Last, First, Middle Initial)			
Α.	MR JOSEPH FRENDO			Date of Receipt
	Mailing Address 9 GREEN HILL TRAIL			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23602
	TROPHY CLUB	TX	76262	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1 1	
	federal political committee.	C		50.00
	Name of Employer	10		_
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:		Year-to-Date ▼	-
	Primary General	1999		1
	Other (specify) ▼		1050.00	
ь	Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL			Data of Danaint
В.	Mailing Address 55 WHEELER			Date of Receipt
	Mailing Address 55 WHEELER			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23473
	EDGEWOOD	RI	02905	Amount of Each Receipt this Period
	FEC ID number of contributing			30.00
	federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS	SR MGR	POLICY & ANALYSIS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		330.00	
	Other (specify)	0 0	330.00	
	Full Name (Last, First, Middle Initial)			
C.	MR JOSEPH GALARDI			Date of Receipt
	Mailing Address 24 MOREHOUSE PL			M M / D D / Y Y Y Y
	011	<u> </u>	7. 0 .	05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23407
	NEW PROVIDENCE	NJ	07974	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Tederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			NG COUNSEL	\dashv
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		550.00	
		0 0	1 1 1 1 1 1 1	
s	UBTOTAL of Receipts This Page (optional)			130.00
\vdash	. 3 (1)			

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 35 / 195
· ·			Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			,	13 14 15 16 17
An	y information copied from such Reports and Sta	atements may	not be sold or used by any person	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
	E 11.51			T
Α.	Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI			Date of Receipt
	Mailing Address 333 N. CANAL ST. #18	<u></u>		M M / D D / Y Y Y Y
	000 14. O/ 114/12 01. #10	J-T		05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23715
	CHICAGO	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		100.00
	N (5.1	10		_
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Descipt For:	GENERA		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		1100.00	
	(open,)) \	0 0	0 0 0 0 0 0 0	
_	Full Name (Last, First, Middle Initial)			
В.	MR BARNEY GALLASSIO			Date of Receipt
	Mailing Address 69 LAKEVIEW DR			M M / D D / Y Y Y Y
	-			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23577
	OLD TAPPAN	NJ	07675	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.	0		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	7
	MEDCO HEALTH SOLUTIONS	VP CLIE	NT RELATIONS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		004.00	
	Other (specify) ▼		281.92	
C.	Full Name (Last, First, Middle Initial) MICHAEL GALVIN			Date of Receipt
C.	Mailing Address 4 LONE PINE LANE			╡
	Walling Address 4 LONE PINE LAINE			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23738
	WESTPORT	CT	06880	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		125.00
		10		_
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:	-	EF INFRASTRUCTURE OFF • Year-to-Date ▼	7
	Primary General	Ayyreyale	, real-to-Date ▼	
	Other (specify)		1375.00	
	I			
s	UBTOTAL of Receipts This Page (optional)			275.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 36 / 195 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\geq	MEDGO HEALTH SOLUTIONS INC. PC	LITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR PETER GAYLORD			Date of Receipt
	Mailing Address 1201 BRIDGE STREET			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23406
	ASBURY PARK	NJ	07712	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL	NCIAL EVALUATIONS	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		550.00	
_	Full Name (Last, First, Middle Initial)			B. (B.)
В.	MR FRANK GENTILELLA Mailing Address 20 BROOKSHIRE DR			Date of Receipt
				05 13 2006
	City ROBBINSVILLE	State NJ	Zip Code 08691	Transaction ID: INC:A:23479 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00031	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	L MGR GROUP	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
<u> </u>	Full Name (Last, First, Middle Initial) MR THOMAS GILSON			Date of Receipt
	Mailing Address 2 PELL FARM ROAD			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23711
	SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	L MGR	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	2115.41	
S	UBTOTAL of Receipts This Page (optional)			292.31
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 37 / 195 (check only one)	
11	EINILED DECEILI 2		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS MICHELE GLYNN			Date of Receipt
	Mailing Address 26 FURMAN CT	Otala	7'- O-d-	05 13 2006
	City MAHWAH	State NJ	Zip Code	Transaction ID: INC:A:23624
		INU	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n PRODUCT MGMT	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		275.00	
В.	Full Name (Last, First, Middle Initial) MR JAMES GORMAN			Date of Receipt
	Mailing Address 11 WASHBURN RD	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:23453
	CANTON	CT	06022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	1 CLIENT & MKT PROG STRA	AT
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) MR JAMES GRANT, JR			Date of Receipt
	Mailing Address 1928 BEVERLY LANE			05 13 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23493
	BUFFALO GROVE	IL	60089	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL	n NCIAL INSIGHTS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	275.00	
s	UBTOTAL of Receipts This Page (optional)			75.00

TOTAL This Period (last page this line number only)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 38 / 195 (check only one)	
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) MR EDWARD GRIX			Date of Receipt	
	Mailing Address 525 ORANGEBURG RD			05 13 2006	
	City PEARL RIVER	State NY	Zip Code 10965	Transaction ID: INC:A:23515 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n E-COM BUSINESS OPS	_	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 265.00		
3.	Full Name (Last, First, Middle Initial) MS GINA GRUHN			Date of Receipt	
	Mailing Address 13 WEATHER VANE DR	0 5 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	·			
	CONVENT STATION FEC ID number of contributing federal political committee.	C	07960	Amount of Each Receipt this Period 25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00		
) .	Full Name (Last, First, Middle Initial) MR RICHARD GUIOR			Date of Receipt	
	Mailing Address 50 BELLEVUE AVE			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City SUMMIT	State NJ	Zip Code 07901	Transaction ID: INC:A:23421	
	FEC ID number of contributing federal political committee.	C	07901	Amount of Each Receipt this Period 90.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACC1			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 990.00		
s	UBTOTAL of Receipts This Page (optional)			140.00	
Т	OTAL This Period (last page this line number onl	v)			

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 39 / 195
	·		Use separate schedule(s) or each category of the	(check only one)	
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b	11c 🔲 12 _
			, ,	13 14	15 16 17
An or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting solicit contributions from suc	g contributions ch committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		71		
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) MR MARK HALLORAN			Date of Receipt	
	Mailing Address 19 KINGS RIDGE ROAD)		05 / 13	2006
	City	State	Zip Code	Transaction ID: INC:	A:23614
	LONG VALLEY	NJ	07853	Amount of Each Recei	pt this Period
	FEC ID number of contributing federal political committee.	C			80.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF IN	n NFO OFFICER		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		880.00	1	
	Other (specify)		880.00		
3.	Full Name (Last, First, Middle Initial) MR GREGORY HANSEN			Date of Receipt	
	Mailing Address 1659 ISABELLA PARKW	0 5	2006		
	City	State	Zip Code	Transaction ID: INC:	A:23714
	CHASKA	MN	55318	Amount of Each Recei	pt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACC	n ΓSVCS & ADMIN		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		550.00		
	Other (specify)				
Э.	Full Name (Last, First, Middle Initial) MS KELLY HANZAWA			Date of Receipt	
	Mailing Address 1116 OAKCROFT LANE			0 5 / D D /	2006
	City	State	Zip Code	Transaction ID: INC:	
	SOMERSET	NJ	08873	Amount of Each Recei	pt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT REQUIREMENTS		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		275.00	1	
	Other (specify)		273.00		
s	UBTOTAL of Receipts This Page (optional)				155.00
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- 1 '	OTAL This Period (last page this line number on	ıı y)	·······		

91	CHEDULE A (FEC Form 3X)	[FOR LINE NUMBER: PAGE 40 / 195
	•		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Gairmaly Fage	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any personers of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR PETER HARTY			Date of Receipt
	Mailing Address 19520 YELLOW WING	COURT		05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23408
	COLORADO SPRINGS	CO	80908	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP POLICE		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		1889.24	1
	Other (specify)	1 1	1000.21	1
— В.	Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD			Date of Receipt
	Mailing Address 13210 N. 11TH AVE.			M M / D D / Y Y Y Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23462
	PHOENIX	AZ	85029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR SALE		
	Receipt For:		Year-to-Date ▼	_
	Primary General	7 199. 094.10		7
	Other (specify) ▼		275.00	
<u> </u>	Full Name (Last, First, Middle Initial) MR SCOTT HELMUS			Date of Receipt
	Mailing Address 23 VALLEY RD			05 13 YYYYY 2006
	City	State	Zip Code	Transaction ID: INC:A:23446
	SUCCASUNNA	NJ	07876	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHAF		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		450.00	1
	Other (specify)		450.00	1
_	UDTOTAL (CD) 11 TH D			267.31
S	UBTOTAL of Receipts This Page (optional)			-

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 41 / 195
	ITEMIZED RECEIPTS		or each category of the	(check only one)
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_				13 14 15 16 17
Ar	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may me and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. POL	. Medco Health PAC)		
			,	,
	Full Name (Last, First, Middle Initial)			B . (B
Α.	MR ERIC HESS			Date of Receipt
	Mailing Address 10 CARLTON RD			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23505
	FLANDERS	NJ	07836	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		40.00
	Name of Employer	O		_
	MEDOO HE'ALTH SOLLITIONS	Occupation	NEERING & OPS	
	Receipt For:		Year-to-Date ▼	
	Primary General	1.5954		1
	Other (specify) ▼		440.00	
	'			
ь	Full Name (Last, First, Middle Initial)			Data of Bassist
В.				Date of Receipt
	Mailing Address 1 HERITAGE RD			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23585
	FLORHAM PARK	NJ	07932	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		30.00
	Name of Employer	Occupation	1	_
	MEDOO HE'ALTH SOLLITIONS	VP/GM		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		550.00	1
	Other (specify)		330.00	
_	Full Name (Last First Middle Initial)			
C.	Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN			Date of Receipt
	Mailing Address 974 HILLCREST ROAD			M ' M / D ' D / Y ' Y ' Y ' Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23658
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Tederal political committee.			
	MEDOO HE'NI TH COLUTIONS	Occupation		
		VP FACIL		_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		330.00	
		0 0		1
s	UBTOTAL of Receipts This Page (optional)	120.00		
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Ιт	OTAL This Period (last page this line number only	<i>(</i>)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 42 / 195
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P			
Full Name (Last, First, Middle Initial) MR TIMOTHY HOGAN Mailing Address 9 HIRLE ST City CORNWALL ON HUDSON FEC ID number of contributing federal political committee.	State NY	Zip Code 12520	Date of Receipt M M
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		DAL SPECIALIST Party Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC:A:23609
ELMSFORD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	NY C	10523	Amount of Each Receipt this Period 80.00
Receipt For: Primary General Other (specify)		RVENTION DELIVERY SYS® Year-to-Date ▼ 880.00	<u>T</u>
Full Name (Last, First, Middle Initial) MR WALTER HOSP Mailing Address 1 OLD LANE			Date of Receipt Date of Receipt 1 3 2 0 0 6
City SCARSDALE	State NY	Zip Code 10583	Transaction ID: INC:A:23562 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP TREA		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			130.00
TOTAL This Period (last page this line number of	only)	>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER	PAGE 43 / 195	
	ITEMIZED RECEIPTS		or each category of the	(check only one)	¬ ¬
••			Detailed Summary Page	X 11a 11b	11c 12 15 16 17
۸۰	y information applied from augh Departs and Sta	tomonto mo	, not be cold or used by any parce		
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from	such committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
			,	•	
	Full Name (Last, First, Middle Initial)			5. (5	
Α.	MS JANE HULSE			Date of Receipt	
	Mailing Address 95 GORDON RD			0 5 1 3	
	City	State	Zip Code	Transaction ID:	
	ESSEX FELLS	NJ	07021	Amount of Each R	
	FEC ID number of contributing			7 tinoditi di Eddit i	· · · · · · · · · · · · · · · · · · ·
	federal political committee.	C			50.00
	·				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
	Receipt For:	VP FINAL		_	
	Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)		550.00		
	Full Name (Last, First, Middle Initial)				
В.	MR DAVID ISRAEL			Date of Receipt	
	Mailing Address 730 COLUMBUS AVENI	UE		0 5 1 3	
	City	Zip Code			
	City State		·	Transaction ID:	
	NEW YORK	NY	10025	Amount of Each R	eceipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
			BUSINESS DEVELOPMENT		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Primary General Other (specify)	' '	275.00		
	Other (specify)	1	0 0 0 0 0 0 0		
_	Full Name (Last, First, Middle Initial)				
C.	MS SUSAN ITO			Date of Receipt	
	Mailing Address 6366 SW 90TH STREET	Τ		M M / D D	
	City	Ctata	7in Codo	05 13	
	City GAINESVILLE	State FL	Zip Code 32608	Transaction ID:	
		15	32000	Amount of Each R	eceipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
			R CLINICAL SVCS		
			Year-to-Date ▼	.]	
	Primary General Other (specify)		550.00		
	Other (specify)	0 0 0 0 0 0 0			
	UBTOTAL of Receipts This Page (optional)				125.00
\vdash					
T	OTAL This Period (last page this line number or	nly))		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 44 / 195
ITEMIZED RECEIPTS			or each category of the	(check only one)
_			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	ly information copied from such Reports and Stat- for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR TODD JEFFREY			Date of Receipt
	Mailing Address 15 ELIZABETH STREET			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23703
	DUMONT	NJ	07628	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHAF	n RM CONTRACT & CONSULT	TING
	Receipt For:	Aggregate	e Year-to-Date ▼	1
	Primary General Other (specify) ▼		275.00	
3.	Full Name (Last, First, Middle Initial) MISS ANNE JOHNSTON			Date of Receipt
	Mailing Address 256 MADISON AVE			05 13 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23701
	RIVER EDGE	NJ	07661	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		330.00	
	(-F)/ V	0 0	0 0 0 0 0 0 0	
Э.	Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
	Mailing Address 12 WADE HAMPTON TF	RAIL		05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23660
	HENDERSON	NV	89052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.08
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		316.68	
s	UBTOTAL of Receipts This Page (optional)		_	70.08
	, -3- (-1)		<u>^</u>	
T	OTAL This Period (last page this line number on	ly)	>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 45 / 195
	· · · · · · · · · · · · · · · · · · ·		Use separate schedule(s) or each category of the	(check only one)	
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b	11c 12 _
			,	13 14	15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of solicitir solicit contributions from su	ng contributions uch committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		71		
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD			Date of Receipt	
	Mailing Address 16357 VICTORIA CRUVI	E SE		05 13	2006
	City	State	Zip Code	Transaction ID: INC	:A:23537
	PRIOR LAKE	MN	55372	Amount of Each Rece	eipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT & MKT PROG STRAT		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		275.00	1	
	Other (specify) ▼		273.00		
3.	Full Name (Last, First, Middle Initial) MS BECKY KAUS			Date of Receipt	
	Mailing Address N81 W18359 TOURS DF	0 5 D D 1 3	2006		
	City	State	Zip Code	Transaction ID: INC	:A:23526
	MENOMONEE FALLS	WI	53051	Amount of Each Rece	eipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n IICAL SVCS		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		275.00		
).	Full Name (Last, First, Middle Initial) MR WILLIAM KEELER			Date of Receipt	
	Mailing Address 63 MOUNTAIN GLEN RO	DAD		0 5 1 3	2006
	City	State	Zip Code	Transaction ID: INC	:A:23721
	RINGWOOD	NJ	07456	Amount of Each Rece	eipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		275.00	1	
	Other (specify) ▼		273.00		
s	UBTOTAL of Receipts This Page (optional)				75.00
_	OTAL This Period (last page this line number on	lv)			
	OTAL This Period (last page this line number onl	ıy <i>)</i>	·······		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 46 / 195 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and ado	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III			Date of Receipt
	Mailing Address 1970 WOODLANDS PL			05 13 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City POWELL	State OH	Zip Code 43065	Transaction ID: INC:A:23579 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	
3.	Full Name (Last, First, Middle Initial) MR KEVIN KELLY			Date of Receipt
	Mailing Address 251 POPLAR AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23435
	HACKENSACK FEC ID number of contributing federal political committee.	NJ C	07601	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	CLIENT SVC DELIVERY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
).	Full Name (Last, First, Middle Initial) MS LISA KETNER			Date of Receipt
Mailing Address 7 POINT VIEW				05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC:A:23563 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		NG & PRODUCT DEV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
s	UBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 47/195
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
Any information copied from such Reports and Si	tatements may	v not be sold or used by any perso	n for the purpose of soliciting contributions
or for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) A. MS KARIN KLEINEGGER			Date of Receipt
Mailing Address 121 CONKLING TOWN	N ROAD		05 / 13 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC:A:23693
CHESTER FEC ID number of contributing federal political committee.	C	10918	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC	n CT MGMT OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) KENNETH KLEPPER Mailing Address 295 GLEN PLACE			Date of Receipt
			05 13 2006
City	State	Zip Code	Transaction ID: INC:A:23727
FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS		CHIEF OPERATING OFFIC	ER
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify) ▼	0 0	2115.30	
Full Name (Last, First, Middle Initial) MR JON KLINE			Date of Receipt
Mailing Address 36 CORTLAND TL			05 13 7 2006
City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC:A:23723 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1	50.54
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n PLANNING	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 555.94	
SUBTOTAL of Receipts This Page (optional)			292.84
TOTAL This Pariod (last page this line number)	only)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 48 / 195 (check only one)
IT	ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
\setminus	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.				Date of Receipt
	Mailing Address 555 FORBUSH STREET			05 13 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23685
	BOONTON	NJ	07005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n CLIENT RETAIL	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		220.00	
В.	Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI			Date of Receipt
	Mailing Address 920 CLARK STREET			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23451
	BOWLING GREEN	OH	43402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n LACCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		215.00	
<u> </u>	Full Name (Last, First, Middle Initial) MR RODGER KORMYLO			Date of Receipt
	Mailing Address 1310 43RD AVE			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23533
	KENOSHA	WI	53144	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	CCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)			70.00
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9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 49 / 195
	•		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Suffilliary Fage	13 14 15 16 17
Ar	y information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY			Date of Receipt
	Mailing Address 143 DEERFIELD TERF	ACE		05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23470
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		BUS PLANNING & ADMIN	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼	' '	235.00	
	Other (specify)	0 0	0 0 0 0 0 0 0	4
— В.	Full Name (Last, First, Middle Initial) MS BARBARA KRZAK			Date of Receipt
	Mailing Address 495 ISLAND WAY	M M / D D / Y Y Y Y		
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23617
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-CO	n M STRATEGY & DELIVER	 r
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General		440.00	1
	Other (specify) ▼		440.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN			Date of Receipt
	Mailing Address 2735 YORK RD			05 13 YYYY 2006
	City	State	Zip Code	Transaction ID: INC:A:23671
	COLUMBUS	OH	43221	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGION.	n AL VP PHARMACIES	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		550.00	1
	Other (specify) ▼		550.00]
_				
				115.00
s	UBTOTAL of Receipts This Page (optional)			115.00
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COLLEDING A (FEO Forms OV)				FOR LINE NUMBER: PAGE 50 / 195
5(CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS	or each category of the		
			Detailed Summary Page	
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER			Date of Receipt
	Mailing Address 7017 COBALT WAY	05 13 2006		
	City	State	Zip Code	Transaction ID: INC:A:23565
	CITRUS HEIGHTS	CA	95621	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS		TE GOVERNMENT AFFAIRS	3
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1100.00	
	U Other (specify) ▼		1100.00	
_	Full Name (Last, First, Middle Initial)			
В.	MR ROBERT LONG			Date of Receipt
	Mailing Address 18 HARLIND TERRACE	05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:23555
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1 1	075.00	
	Other (specify) ▼		275.00	
	Full Name (Last, First, Middle Initial)			
C.	MS DEBRA LUDGATE			Date of Receipt
	Mailing Address 238 WOODLAND AVE			05 13 7 9 9 9
	City	State	Zip Code	Transaction ID: INC:A:23520
	SUMMIT	NJ	07901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	n CREATIVE SVCS	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General			
	Other (specify) ▼	1	275.00	
	LIPTOTAL of Possinta This Page (entire -1)		_	150.00
\vdash	UBTOTAL of Receipts This Page (optional)		······	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 51 / 195		
	ITEMIZED RECEIPTS		or each category of the	(check only one)	ı –	
••	LIMIZED REGEN TO		Detailed Summary Page	X 11a 11b	11c 12 15 16 17	
۸۰	y information copied from such Reports and Sta	atomonto mo	, not be cold or used by any parce	13 14		
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from s	uch committee.	
	NAME OF COMMITTEE (In Full)					
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)		
<u>/</u>	Full Name (Last, First, Middle Initial)					
A.	MS CHERYL MACDONALD			Date of Receipt		
	Mailing Address 15011 EAGLEPARK PL	ACE		0 5 1 3	2006	
	City	State	Zip Code			
	LITHIA	FL	33547	Transaction ID: INC Amount of Each Rec		
		00047	Amount of Lacri Nec	elpt this Fellou		
	FEC ID number of contributing federal political committee.	C			25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	n CS REQUIREMENTS	1		
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		275.00			
	Other (specify) ▼		2/5.00			
В.	Full Name (Last, First, Middle Initial) MR KENNETH MALLEY			Date of Receipt		
	Mailing Address 764 W. SADDLE RIVER	R ROAD		M M / D D	/ Y Y Y Y	
				05 13	2006	
	City State		Zip Code	Transaction ID: INC	Transaction ID: INC:A:23507	
	HO HO KUS	NJ	07423	Amount of Each Rec	eipt this Period	
	FEC ID number of contributing federal political committee.	С			50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7		
	MEDICO HEALTH SOLUTIONS	VP PROI	DUCT & CHANNEL MKTING			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General	' '	550.00			
	Other (specify) ▼	0 0				
C.	Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO			Date of Receipt		
	Mailing Address 33 HICKORY TAVERN	RD		M M / D D	7 7 7 7 7	
	City	State	Zin Codo	05 13	2006	
	GILLETTE	NJ	Zip Code 07933	Transaction ID: INC Amount of Each Rec		
			07900	Amount of Each Net	eipt triis Feriod	
FEC ID number of contributing federal political committee.		C			50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL		1		
Receipt For: Aggr		Aggregate	e Year-to-Date ▼			
	Primary General		550.00			
Other (specify)			330.00			
٩	UBTOTAL of Receipts This Page (optional)		125.00			
\vdash	DE LA LOS TICOCIPIO TINO L'Age (optional)					
T	OTAL This Period (last page this line number o	nly)	>			

SCHEDULE A (FEC Form 3X)			Llac concrete cobodulo(a)	FOR LINE NUMBER: PAGE 52 / 195
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
•••	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
or	y information copied from such Reports and States for commercial purposes, other than using the i	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
\angle				
Α.	Full Name (Last, First, Middle Initial) 4. MS TAMARA MARSHALL			Date of Receipt
	Mailing Address W144 N7150 TERRACI	E DRIVE		M M / D D / Y Y Y Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23522
	MENOMONEE FALLS	WI	53051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	 1	\dashv
	MEDCO HEALTH SOLUTIONS		ACCT EXEC	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	275.00	
	Other (specify)	0 0	270.00	
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 11825 SHEPPARDS CROSSING			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23489
	CLARKSVILLE	MD	21029	Amount of Each Receipt this Period
	FEC ID number of contributing			192.30
	federal political committee.	C		132.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
		GENERA		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)		2115.30	
	Galer (opening)			'
<u>с.</u>	Full Name (Last, First, Middle Initial) MR ROBERT MATCHETT			Date of Receipt
	Mailing Address 27 LAKEVILLE RD			05 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23460
	SUSSEX	NJ	07461	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
	Receipt For:		Year-to-Date ▼	1
	Primary General		275.00	
	Other (specify)		275.00	
٩	UBTOTAL of Receipts This Page (optional)			242.30
\vdash	ODITION TO CONTROL THIS T age (optional)			

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 53 / 195 (check only one)
ΙT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Star for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR JEFFREY MAY			Date of Receipt
	Mailing Address 137 WASHINGTON AVE			05 13 2006
	City HILLSDALE	State NJ	Zip Code 07642	Transaction ID: INC:A:23661 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS		G DISTRIB & CONTROL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2115.30	
3.	Full Name (Last, First, Middle Initial) MS PATRICIA MAZZONE			Date of Receipt
	Mailing Address 56 PENOBSCOT ST	05 13 7 2006		
	City	State	Zip Code	Transaction ID: INC:A:23561
	CLIFTON FEC ID number of contributing federal political committee.	C	07013	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		PRODUCT SVCS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 275.00	
- C.	Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD			Date of Receipt
	Mailing Address 0-45 27TH ST			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City FAIR LAWN	State NJ	Zip Code 07410	Transaction ID: INC:A:23610 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07410	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)			242.30
T	OTAL This Period (last page this line number or	nlv)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER	: PAGE 54 / 195		
	ITEMIZED RECEIPTS		or each category of the	(check only one)		
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Δ.	winformation against from guide Departs and Cta	stamonto mai	, not be cold or used by any never	13 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	15 16 17	
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	rnot be sold or used by any perso dress of any political committee to	solicit contributions fron	n such committee.	
	NAME OF COMMITTEE (In Full)		71			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DI ITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
			(4		,	
	Full Name (Last, First, Middle Initial)					
Α.	MS COLLEEN MCINTOSH			Date of Receipt		
	Mailing Address 87 ROSELAWN RD			05 13		
	City	State	Zip Code	Transaction ID:		
	HIGHLAND MILLS	NY	10930	Amount of Each F		
	FEC ID number of contributing			7 tillodiit of Edolf i		
	federal political committee.	C			116.00	
	·			_		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
	Receipt For:	COUNSE	EL e Year-to-Date ▼	_		
	Primary General	Aggregate	rear-to-Date V	,		
	Other (specify)		1276.00			
	Full Name (Last, First, Middle Initial)					
В.	MR STEVEN MCNAMARA			Date of Receipt		
	Mailing Address 112 GREEN TERRACE	05 13				
	City	Zip Code				
	City State		·		Transaction ID: INC:A:23700 Amount of Each Receipt this Period	
	WEST MILFORD	NJ	07480	Amount of Each F	Receipt this Period	
	FEC ID number of contributing federal political committee.	C			192.31	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
	·	1	SINESS OPS			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			
	Other (specify)	' '	2115.41			
	Curior (openity)	1 1	1 1 1 1 1 1 1 1			
	Full Name (Last, First, Middle Initial)					
C.	DAVID MILLER			Date of Receipt		
	Mailing Address 7 CLOVER LANE			05 13		
	City	State	Zip Code	Transaction ID:		
	RANDOLPH	NJ	07869	Amount of Each F		
			07003	Amount of Lacif P	receipt this renou	
	FEC ID number of contributing federal political committee.	C			25.00	
				_		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
			OR RELATIONS	_		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼			
Other (specify)			275.00			
			0 0 0 0 0 0	1		
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s	UBTOTAL of Receipts This Page (optional)				333.31	
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lπ	OTAL This Period (last page this line number or	nlv)	>			

S	CHEDULE A (FEC Form 3X)		lles servets selectivis(s)	FOR LINE NUMBER: PAGE 55 / 195
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIP 15		Detailed Summary Page	X 11a 11b 11c 12
			, -	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any person	n for the purpose of soliciting contributions
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		arrie ariu auc	liess of any political committee to	Solicit Contributions from Such Committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC		ACTION COMMITTEE (a.k.a.	Madaa Haalth BAC)
	MEDGO HEALTH SOLUTIONS INC. PC	JLITICAL P	ACTION COMMITTEE (a.K.a.	Medco Health FAC)
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	MRS KAREN MILLER			Date of Receipt
	Mailing Address 14 ANDERSON RD			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	
	City WHARTON	NJ	07885	Transaction ID: INC:A:23418
		INU	07883	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		SR DIR F		4
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	330.00	
	cance (epocary) 🗸	-		
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 12 LINCOLN ROAD			05 13 Y Y Y Y Y Y
	City	State	Zip Code	
	KINNELON	NJ	07405	Transaction ID: INC:A:23712 Amount of Each Receipt this Period
		140	07403	Amount of Each Necelpt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	<u>'</u>			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:	ļ -	E-COM STRAT & DELI Year-to-Date ▼	_
	Primary General	Aggregate	rear-to-Date ▼	
	Other (specify)		275.00	
_	Full Name (Last, First, Middle Initial)			
C.	MR BHUPESH MISTRY			Date of Receipt
	Mailing Address 106 HAMBURG ROAD			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23427
	PARSIPPANY	NJ	07054	Amount of Each Receipt this Period
	FEC ID number of contributing			05.00
	federal political committee.	C		25.00
	Name of Employer	Occupation	<u> </u>	-
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST	
	Receipt For:		Year-to-Date ▼	1
	Primary General	35 0		
	Other (specify) ▼		275.00	
_				
				80.00
S	UBTOTAL of Receipts This Page (optional)	<u></u>	<u> </u>	80.00

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IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 195 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY			Date of Receipt
	Mailing Address 86 WELLINGTON AVEN	05 13 2006		
	City SHORT HILLS	State NJ	Zip Code 07078	Transaction ID: INC:A:23412 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07070	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		PUTY GENERAL COUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) MR RICHARD MOUNTJOY			Date of Receipt
	Mailing Address 2 STONEBRIDGE RD			05 13 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23694
	SPARTA FEC ID number of contributing federal political committee.	NJ C	07871	Amount of Each Receipt this Period 20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n L ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	
— С.	Full Name (Last, First, Middle Initial) MR KEVIN MURPHY, JR			Date of Receipt
	Mailing Address 105 COVENTRY LN			05 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City TRUMBULL	State CT	Zip Code 06611	Transaction ID: INC:A:23449 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 725.00	
s	UBTOTAL of Receipts This Page (optional)			145.00

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 57 / 195 (check only one)
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nan	ments may ne and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MS BECKY NAGLE			Date of Receipt
	Mailing Address 64 WALTER AVE			05 13 2006
	City HASBROUCK HEIGHTS	State NJ	Zip Code 07604	Transaction ID: INC:A:23450 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	1 1 1 1 1	25.00
	MEDCO HE'ALTH SOLLITIONS	Occupation	CLINICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
3.	Full Name (Last, First, Middle Initial) MR ARTHUR NARDIN			Date of Receipt
	Mailing Address 28 POWDERHORN DR	05 13 2006		
	City	State	Zip Code	Transaction ID: INC:A:23663
	KINNELON FEC ID number of contributing federal political committee.	NJ C	07405	Amount of Each Receipt this Period
	MEDCO HE'ALTH SOLLITIONS	Occupation	n ARMACEUTICAL CONTRAC	TNG
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2112.00	
- C.	Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN			Date of Receipt
	Mailing Address 45 DAVIS ROAD			05 13 2006
	City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC:A:23525
	FEC ID number of contributing federal political committee.	C	07071	Amount of Each Receipt this Period 26.00
	MEDOO HEXITH SOLLITIONS	Occupation DIR E-CO	n DM STRAT & DELIV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 286.00	
s	UBTOTAL of Receipts This Page (optional)			243.00
T	OTAL This Period (last page this line number only	·)		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 58 / 195
ITEMIZED RECEIPTS	-	or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		·	
MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) A. MR CHARLES OESTREICHER			Date of Receipt
Mailing Address 6 PARK DR SOUTH			05 13 2006
City	State	Zip Code	Transaction ID: INC:A:23684
RYE	NY	10580	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-CO	n NM STRATEGY & DELIVERY	,
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	550.00	
Full Name (Last, First, Middle Initial) 3. MR MELVIN OHL			Date of Receipt
Mailing Address 274 E FRANKLIN T	PKE		05 13 7 2006
City	State	Transaction ID: INC:A:23636	
RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	n CUREMENT & INVENTORY	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		550.00	
Full Name (Last, First, Middle Initial) C. MS CLAUDINE OLSEN	1		Date of Receipt
Mailing Address 4 HIGHGATE CT			M M / D D / Y Y Y Y
City	State	Zip Code	0 5 1 3 2 0 0 6 Transaction ID: INC:A:23677
SUFFERN	NY	10901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		275.00	
SUBTOTAL of Receipts This Page (optional)	·····	125.00
TOTAL This Period (last page this line numb	per only)		
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 59 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MS NATALYA ONIK			Date of Receipt
	Mailing Address 1 SCHINDLER CT			05 13 2006
	City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC:A:23543 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
3.	Full Name (Last, First, Middle Initial) MS ROSE OWEN			Date of Receipt
	Mailing Address 4108 MOUNTAIN ROAD	0 5		
	City	Transaction ID: INC:A:23571		
	GLEN ALLEN FEC ID number of contributing federal political committee.	C	23060	Amount of Each Receipt this Period 40.00
	Name of Employer MEDCO HEALTH SOLUTIONS		TE GOVERNMENT AFFAIR	6
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 440.00	
) .	Full Name (Last, First, Middle Initial) MS LUDIVINA PACAMARRA			Date of Receipt
	Mailing Address 4 TEAK COURT			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23623
	RINGWOOD FEC ID number of contributing federal political committee.	NJ C	07456	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
s	UBTOTAL of Receipts This Page (optional)			115.00
T	OTAL This Period (last page this line number onl	v)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 60 / 195 (check only one)
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI			
۹.	Full Name (Last, First, Middle Initial) MS DAWN PAGANO Mailing Address			Date of Receipt
	Mailing Address 185 PASCACK ROAD			05 13 2006
	PARK RIDGE	State NJ	Zip Code 07656	Transaction ID: INC:A:23622 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	1 TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	
3.	Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE			Date of Receipt
	Mailing Address 12 MILLBROOK COURT	05 13 2006		
	City	State	Zip Code	Transaction ID: INC:A:23539
	EIVINGSTON FEC ID number of contributing federal political committee.	C	07039	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		MARKET STRATEGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
D .	Full Name (Last, First, Middle Initial) MR MICHAEL PETEROY			Date of Receipt
	Mailing Address 18 MOUNTAIN VIEW CT			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23605
	RIVERDALE FEC ID number of contributing federal political committee.	NJ C	07457	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	DUCT DEVELOPMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)			100.00
T	OTAL This Period (last page this line number onl	v)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 61 / 195
ıт	EMIZED RECEIPTS		or each category of the	(check only one)
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Ar	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		71	
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR THOMAS PETTYES			Date of Receipt
	Mailing Address 8522 UPLAND LN NOR	TH		05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23483
	MAPLE GROVE	MN	55311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n AL MGR GROUP	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	' '	330.00	
	Other (specify)	0 0		
В.	Full Name (Last, First, Middle Initial) MS JUDITH PLATKIN			Date of Receipt
	Mailing Address 29 BLACKWELL AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	
	•		•	Transaction ID: INC:A:23420
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		GENERA		_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		550.00	
<u> </u>	Full Name (Last, First, Middle Initial) MS JANET PORAT			Date of Receipt
	Mailing Address 5 CRABAPPLE CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23486
	MONSEY	NY	10952	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n INESS REQUIREMENTS	
			e Year-to-Date ▼	
	Primary General		075.00	1
	Other (specify)		275.00	1
s	UBTOTAL of Receipts This Page (optional)			105.00
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 62 / 195
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	tements may ame and ado	r not be sold or used by any perso Iress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		· · · · · · · · · · · · · · · · · · ·	
MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) A. MS KARIN PRINCIVALLE			Date of Receipt
Mailing Address 875 ALEXANDRIA CT			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC:A:23549
RAMSEY	NJ	07446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP HR	1	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify)		2115.30	
	0 0		1
Full Name (Last, First, Middle Initial) 3. MR ROBERT PRITCHET			Date of Receipt
Mailing Address 135 HOLLYBERRY DRIV	M M / D D / Y Y Y Y		
City	State	Zip Code	0 5 1 3 2 0 0 6 Transaction ID: INC:A:23653
HOPEWELL JUNCTION	NY	12533	Amount of Each Receipt this Period
FEC ID number of contributing			25.00
federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
Receipt For:		TRACT ADMINISTRATION Year-to-Date ▼	_
Primary General	riggregate		
Other (specify) ▼	0 0	275.00	
Full Name (Last, First, Middle Initial) C. MR MARK PROULX			Date of Receipt
Mailing Address 20 BRANDY RIDGE RO	AD		05 13 7 2006
City	State	Zip Code	Transaction ID: INC:A:23717
SPARTA	NJ	07871	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHA	n ARMACY & CUST SVC OPS	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1100.00	
SUBTOTAL of Receipts This Page (optional)			317.30
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5	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS	or each category of the		
••			Detailed Summary Page	
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may ame and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS THERESA RAFKIN			Date of Receipt
	Mailing Address 50 GLORIA DRIVE			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23567
	ALLENDALE	NJ	07401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		075.00	1
	Other (specify) ▼	1	275.00	
В.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
	Mailing Address 800 SANDY TRAIL			M M / D D / Y Y Y Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23735
	KELLER	TX	76248	Amount of Each Receipt this Period
	FEC ID number of contributing			40.00
	federal political committee.	C		10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	
		DIR HR		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		210.00	
	Other (specify) ▼		210.00	
_				
C.	Full Name (Last, First, Middle Initial) MS FRANCES RAO			Date of Receipt
	Mailing Address 146 JOHNSON RD			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23436
	SCARSDALE	NY	10583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer	Occupation	 1	7
	Name of Employer MEDCO HEALTH SOLUTIONS	SR DIR F		
	Receipt For:	l	Year-to-Date ▼	
	Primary General	55. 09410	10 = 0110 1	1
	Other (specify)		275.00	
				1
				60.00
LS	UBTOTAL of Receipts This Page (optional)	<u>.</u>	······································	00.00

9	CHEDIII E A /EEC Form 2V)			FOR LINE NUMBER: PAGE 64 / 195
	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)
IT	EMIZED RECEIPTS	or each category of the		X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
۸r	y information copied from such Reports and Sta	tomonte may	y not be cold or used by any person	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO		ACTION COMMITTEE (a.k.a	Madaa Haalth DAC)
/	WEDGO HEALTH SOLUTIONS INC. PC	JLITICAL F	ACTION COMMITTEE (a.K.a	. Medco Health FAC)
	Full Name (Last, First, Middle Initial)			
A.	MS JOANN REED			Date of Receipt
	Mailing Address 4 ANTLER CT			M M / D D / Y Y Y Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23643
	MATAWAN	NJ	07747	Amount of Each Receipt this Period
	FEC ID number of contributing			05.00
	federal political committee.	C		65.38
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			ANCE & CHIEF FIN OFFCR	·
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1	719.18	
	☐ Other (specify) ▼	0 0	710.10	J.
_				
R	Full Name (Last, First, Middle Initial) MR DAVID REILLY			Date of Receipt
Ь.				─
	Mailing Address 1170 FIFTH AVENUE APT # 15D			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23625
	NEW YORK	NY	10029	Amount of Each Receipt this Period
		INI	10029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	rederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	า	7
	MEDGO HEALTH SOLUTIONS	SVP LAB	OR RELATIONS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1 1	140.00	1
	Other (specify)		440.00	
_	Full Name (Last, First, Middle Initial)			Date of Bessiel
C.	MR JOSEPH REYNOLDS			Date of Receipt
	Mailing Address 412 RIVER MEWS LAN	E		05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23732
	EDGEWATER	NJ	07020	
		INU	07020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	rederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDGO HEALTH SOLUTIONS	EXEC DI	R TECHNOLOGY	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General		770.00	11
	Other (specify)		770.00	
s	UBTOTAL of Receipts This Page (optional)			175.38
\vdash	. 3 (1 /			-

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 65 / 195
ITEMIZED RECEIPTS	•	or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DAVID ROBARGE			Date of Receipt
Mailing Address 4565 QUEENSLANI	D LN N		05 13 YYYY 2006
City	State	Zip Code	Transaction ID: INC:A:23459
MINNEAPOLIS	MN	55446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS		NICAL SVCS	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 275.00	1
Other (specify) ▼	0 0	270.00	1
Full Name (Last, First, Middle Initial) 3. MS SORAYA RODRIGUEZ-BALZAC	•		Date of Receipt
Mailing Address 22 PAPOOSE TRAI	L		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Transaction ID: INC:A:23731	
ANDOVER	NJ	07821	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PUB	n BLIC AFFAIRS	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		275.00	
Full Name (Last, First, Middle Initial) C. MR MICHAEL ROMANZO			Date of Receipt
Mailing Address 96 LEHMANN STRE	ET		05 13 2006
City	State	Zip Code	Transaction ID: INC:A:23500
MAHWAH	NJ	07430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRESIDE	n ENT SYSTEMED	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	550.00	
SUBTOTAL of Receipts This Page (optional)		100.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 66 / 195
IT	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may ime and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.				Date of Receipt
	Mailing Address 7 RED OAK LANE			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23654
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS-	n CLINICAL TECH	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		550.00	
	Other (specify) ▼	0 0	330.00	
В.	Full Name (Last, First, Middle Initial) MR RICHARD RUBINO			Date of Receipt
	Mailing Address 3103 RIO VISTA DRIVE			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23650
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1 1	
	federal political committee.	C		85.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			ONTROLLER	_
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		935.00	
<u> </u>	Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK			Date of Receipt
٠.	Mailing Address 21 SKY TOP RIDGE			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: INC:A:23517
	OAKLAND	NJ	07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FORM	n MULARY & COVERAGE MG	MT
			Year-to-Date ▼	7
			550.00	1
	Other (specify) ▼		550.00	
Г				405.00
s	UBTOTAL of Receipts This Page (optional)		·····	185.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 67 / 195
ıт	EMIZED RECEIPTS		or each category of the	(check only one)
"	EIVIIZED NECEIP I 3		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ry information copied from such Reports and State for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS MARY RYAN			Date of Receipt
	Mailing Address 456 RICHMOND AVEN	UE		05 13 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23642
	MAPLEWOOD	NJ	07040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.34
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP COR	n P REGULATORY AFFAIRS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		861.74	1
	Culoi (oposity) 🔻	0 0		
В.	Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE			Date of Receipt
	Mailing Address 7 AHERN WAY			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23536
	WEST ORANGE	NJ	07052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n FECHNOLOGY	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		275.00	
_	Full Name (Last, First, Middle Initial) MR DAVID SCHLETT			Date of Receipt
٥.	Mailing Address 339 GRAMERCY PL			M M / D D / Y Y Y Y
	Maining / Mainese 359 CHAINEHOTTE			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23649
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ANAL	n LYTICAL SVCS	
	Receipt For:	-	e Year-to-Date ▼	
	Primary General		550.00	1
	Other (specify)	0 0	330.00	1
s	UBTOTAL of Receipts This Page (optional)			153.34

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 68 / 195
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
		, ,	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	itements may ame and add	y not be sold or used by any perso dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) A. MR ALLEN SCHWARTZ			Date of Receipt
Mailing Address 3556 DAVIS			05 13 7 2006
City <u>EVANSTON</u>	State IL	Zip Code 60203	Transaction ID: INC:A:23455 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT			Date of Receipt
Mailing Address 7330 EVEREST LANE -	05 13 7 9 9 9		
City	State	Zip Code	Transaction ID: INC:A:23687
MAPLE GROVE	MN	55311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		275.00	
Full Name (Last, First, Middle Initial) MR LEONARD SCOTT			Date of Receipt
Mailing Address 2300 MCCUE ROAD - S	SUITE 212		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC:A:23580
HOUSTON	TX	77056	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS		R ACCT MGMT	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 275.00	
SUBTOTAL of Receipts This Page (optional)		·····	75.00
TOTAL This Period (last page this line number or	nly)		

0	CHEDIII E A /EEC Form 2V)			FOR LINE NUMBER: PAGE 69 / 195
	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)
ΙT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Δr	y information copied from such Reports and Sta	tomonte may	, not be sold or used by any pers	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.s	Medco Health PAC)
	WEDGO HEXETH GOEGHONG ING. I	JEITIONE 7	torion ociviivii i i e (a.n.e	i. Wedee Health 1710)
	Full Name (Last, First, Middle Initial)			
A.	MR ROBERT SENDEWICZ			Date of Receipt
	Mailing Address 1220 CROSSING WAY			M M / D D / Y Y Y Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23439
	WAYNE	NJ	07470	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		25.00
	N (F)	10		_
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Descript Form		rechnology	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)	' '	275.00	
	Ciriei (specify)		0 0 0 0 0 0 0	1
_	Full Name (Last First Middle Initial)			-
B.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III			Date of Receipt
	Mailing Address 266 BRUSHY CREEK A	VF		M M / D D / Y Y Y Y
	Maining Address 200 BITOOTTI OTTEEN A	05 13 2006		
	City	State	Zip Code	Transaction ID: INC:A:23560
	LAS VEGAS	NV	89148	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		28.85
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		DIR OPS		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		375.05	1
	Other (specify) ▼		070.00	_
_				
C	Full Name (Last, First, Middle Initial) MR JOHN SHEA			Date of Receipt
•	Mailing Address 62 FRANKLIN TURNPIK	<u></u>		M M / D D / Y Y Y Y
	Walling / Idai 999 OZ I I IAINICEIN I OTINI II	\L		05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23426
	ALLENDALE	NJ	07401	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		ASST CC		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		440.00	11
	Other (specify) ▼		110.00	1
_				
				93.85
S	UBTOTAL of Receipts This Page (optional)			93.03
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S	CHEDULE A (FEC Form 3X)		Harana and a shadala (a)	FOR LINE NUMBER: PAGE 70 / 195
	· · · · · · · · · · · · · · · · · · ·		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, -	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or		ame and add	iress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
	5 HAL			
Α.	Full Name (Last, First, Middle Initial) MR FRANK SHEEHY			Date of Receipt
۸.	Mailing Address 119 HAMILTON RD			M M / D D / Y Y Y Y
	Maining Address 119 HAWIETON AD			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23467
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	•			
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		GENERA		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		1100.00	
	Other (specify) ▼	1 1	1100.00	
В.	Full Name (Last, First, Middle Initial) MR PETER SHERMAN			Date of Receipt
٥.	Mailing Address 139 GATES AVENUE			M M / D D / Y Y Y Y
	Maining Address 199 CATES AVEINGE			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23413
	MONTCLAIR	NJ	07042	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
				_
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			NG COUNSEL	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	550.00	
	Carlor (oposity) 🔻			
_	Full Name (Last, First, Middle Initial)			
C.	MR ELWOOD SIDES III			Date of Receipt
	Mailing Address 150 CLAREMONT AVE			M M / D D / Y Y Y Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23471
	LONG BEACH	CA	90803	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.	9		
	Name of Employer	Occupation	า	7
	Name of Employer MEDCO HEALTH SOLUTIONS	VP SALE		
	Receipt For:		Year-to-Date ▼	1
	Primary General		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Other (specify) ▼		275.00	
_				
				100
s	JBTOTAL of Receipts This Page (optional)			125.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 71 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
An or	y information copied from such Reports and Staten for commercial purposes, other than using the nam	nents may ne and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	ITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) JEFFREY SIMEK Mailing Address 197 OXFORD RD			Date of Receipt
		Ctoto	7in Codo	05 13 2006
	City CHESTER	State NY	Zip Code 10918	Transaction ID: INC:A:23544 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	MEDCO HE'AI TH SOLLITIONS	Occupation	ı IC AFFAIRS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.41	
3.	Full Name (Last, First, Middle Initial) MR LEE SIMON			Date of Receipt
	Mailing Address 2390 GREENVIEW ROAD	0 5		
	City	State	Zip Code	Transaction ID: INC:A:23695
	NORTHBROOK	IL	60062	Amount of Each Receipt this Period
	Todoral political committee.	C		50.00
	MEDCO HE'AI TH SOLLITIONS	Occupatior SENERA	n IL MGR GROUP	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
 C.	Full Name (Last, First, Middle Initial) MR JEFFREY SINKO			Date of Receipt
Mailing Address 10 CHERRY TREE LANE				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23574
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	Tederal political committee.	С		25.00
		Occupation COUNSE		
			Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)			267.31
T	OTAL This Period (last page this line number only))		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 72 / 195
	EMIZED RECEIPTS		or each category of the	(check only one)
	LIMIZED HEOLII 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Δr	ny information copied from such Reports and State	ements may	not he sold or used by any nerso	
or	for commercial purposes, other than using the na	me and add	lress of any political committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO			Date of Receipt
	Mailing Address 564 DALE COURT EAST	•		05 / 13 / 2006
	City	State	Zip Code	Transaction ID: INC:A:23437
	RIVER VALE	NJ	07675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	330.00	
 3.	Full Name (Last, First, Middle Initial) ANN SMITH			Date of Receipt
	Mailing Address 437 GLENDALE RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23535
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation Sr Dir Pu	blic Affairs	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
 C.	Full Name (Last, First, Middle Initial) MR ROBERT SMITH			Date of Receipt
	Mailing Address 40 JOSHUA DR T			05 13 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23670
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1100.00	
s	UBTOTAL of Receipts This Page (optional)			105.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 73 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR Mailing Address 23 CEDAR GATE ROAD	.		Date of Receipt
			7'- 0 - 1-	05 13 2006
	City DARIEN	State CT	Zip Code 06820	Transaction ID: INC:A:23724 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS		AN & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2115.41	
3.	Full Name (Last, First, Middle Initial) MR ALAN SOKALER			Date of Receipt
	Mailing Address 30 MICHELLE WAY		0 5 1 3 Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: INC:A:23744
	PINE BROOK FEC ID number of contributing federal political committee.	C	07058	Amount of Each Receipt this Period 40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 440.00	
— Э.	Full Name (Last, First, Middle Initial) MR RALPH STAIANO			Date of Receipt
	Mailing Address 32 ALDEN RD			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MONROE	State NY	Zip Code	Transaction ID: INC:A:23422
	FEC ID number of contributing federal political committee.	C	10950	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS REQUIREMENTS	<u> </u>
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)			257.31
T	OTAL This Period (last page this line number or	ılv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 195 (check only one) X 11a 11b 11c 12
Ar	ry information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN Mailing Address 7 FOREST LAKE DR City WEST HARRISON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State NY C Occupation SR DIR F Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
3.	Full Name (Last, First, Middle Initial) MS JILL STEARNS Mailing Address 13130 HALSELL DR City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	AUSTIN FEC ID number of contributing federal political committee.	TX	78732	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		n CCT EXEC e Year-to-Date ▼ 275.00	
D .	Full Name (Last, First, Middle Initial) MR CRAIG STEEL Mailing Address 122 DEMAREST AVENU	IE		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City EMERSON FEC ID number of contributing federal political committee. Name of Employer	State NJ C	Zip Code 07630	Transaction ID: INC:A:23490 Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	DIR ACC		
s	UBTOTAL of Receipts This Page (optional)			75.00
T	OTAL This Period (last page this line number on	lv)		

91	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 75 / 195
	•	Use separate schedule(s)		(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Summary Fage	13 14 15 16 17
Ar	y information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS SUSAN STEELE			Date of Receipt
	Mailing Address 501 CONTINENTAL DF	₹		05 13 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23761
	SAGAMORE HILLS	OH	44067	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		275.00	
	Other (specify)	0 0	270.00	
— В.	Full Name (Last, First, Middle Initial) MS AMY STEINKELLNER			Date of Receipt
	Mailing Address 1740 HIGHLAND DRIV	E		M ' M / D ' D / Y ' Y ' Y ' Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23523
	ELM GROVE	WI	53122	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Tederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	·		ICAL SVCS	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify)		550.00	
C.	Full Name (Last, First, Middle Initial) DR GLEN STETTIN			Date of Receipt
	Mailing Address 8 MILL GLEN CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23713
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/GM	n CLIN & THERAP SOL GRO	UP
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1100.00	1
	Other (specify)		1100.00	1
	IIDTOTAL of December This December 15			175.00
\vdash	UBTOTAL of Receipts This Page (optional)			

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 76 / 195					
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)					
11	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12					
			, ,	13 14 15 16 17					
An	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may	not be sold or used by any person	n for the purpose of soliciting contributions					
01		arrie ariu auc	diess of any political committee to	Solicit Contributions from Such Committee.					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	NITICAL A	ACTION COMMITTEE (a.k.a.	Madaa Haalth BAC)					
	MEDGO HEALTH SOLUTIONS INC. PC	LITICAL F	ACTION COMMITTEE (a.K.a.	Medco Health FAC)					
	Full Name (Last, First, Middle Initial)								
A.	MR SCOTT STRATTON			Date of Receipt					
	Mailing Address 351 TIMBERLANE DRIV	Έ		05 13 Y Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: INC:A:23751					
	ORANGE	CT	06477	Amount of Each Receipt this Period					
	FEC ID number of contributing		1 1 1 1 1 1						
	federal political committee.	C		50.00					
	Name of Employee	Ossunstia	•	_					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	DUCT DEVELOPMENT						
	Receipt For:		Year-to-Date ▼	-					
	Primary General	7.99.094.0							
	Other (specify) ▼	1	550.00						
ь	Full Name (Last, First, Middle Initial)			Data of Bassist					
В.	MS PATRICIA STRETE Mailing Address 19275 PAVER BARNES	DOAD		Date of Receipt					
	Mailing Address 19275 PAVER BARNES	ROAD		05 13 2006					
	City	State	Zip Code	Transaction ID: INC:A:23454					
	MARYSVILLE	ОН	43040	Amount of Each Receipt this Period					
	FEC ID number of contributing			25.00					
	federal political committee.	C		25.00					
	Name of Employer	Occupation	<u> </u>	-					
	Name of Employer MEDCO HEALTH SOLUTIONS		IICAL THERAPEUTICS						
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General	1 1	275.00						
	Other (specify) ▼		2/5.00						
	Tull Name (Leat First Middle Initial)								
C.	Full Name (Last, First, Middle Initial) MS COLEEN SULLIVAN			Date of Receipt					
	Mailing Address 38 BARKMILL TERRAC	E		M M / D D / Y Y Y					
				05 13 2006					
	City	State	Zip Code	Transaction ID: INC:A:23696					
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		25.00					
	rederal political committee.								
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation							
			PRODUCT DEVELOPMENT	-					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼						
	Other (specify)		275.00						
	Calor (openit) \		0 0 0 0 0 0 0						
s	JBTOTAL of Receipts This Page (optional)		.	100.00					
\vdash	. 3 (1/								

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: (check only one)	PAGE 77 / 195
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b	11c
An	ly information copied from such Reports and Statem	nents may	not be sold or used by any perso	n for the purpose of solicit	15 16 17 17 19 19 19 19 19 19 19 19 19 19 19 19 19
or	for commercial purposes, other than using the nam	e and add	ress of any political committee to	solicit contributions from s	such committee.
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	TICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) MS CYNTHIA SULLIVAN			Date of Receipt	
	Mailing Address 21 DENISE DRIVE			05 / 13	2006
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC	
	FEC. ID asserbles of a satisfaction	C	07403	Amount of Each Rec	50.00
		Occupation	1		
			NCIAL PLANNING		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)	0 0	550.00		
3.	Full Name (Last, First, Middle Initial) MR MARK SULLIVAN			Date of Receipt	
	Mailing Address 821 SUMMIT CT			0 5 D D D 1 3	2006
	City	State	Zip Code	Transaction ID: IN	
	MANAKIN SABOT	VA	23103	Amount of Each Rec	ceipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	MEDCO HEALTH SOLUTIONS		SYSTEMS PLAN & IMPLEM		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		275.00		
<u> </u>	Full Name (Last, First, Middle Initial) MS IRENE SUTTON			Date of Receipt	
	Mailing Address 374 KINGSTON CT			05 / 13	2006
	City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC	
	FEO ID words and contribution		07093	Amount of Each Rec	
	federal political committee.	С			25.00
	MEDCO HEALTH SOLUTIONS S		ECHNOLOGY		
	Primary General	Aggregate	Year-to-Date ▼ 275.00		
	Other (specify) ▼	0 0			
s	UBTOTAL of Receipts This Page (optional))		100.00
T	OTAL This Period (last page this line number only)		>		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 78 / 195
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any person	n for the purpose of soliciting contributions
<u>~</u>	NAME OF COMMITTEE (In Full)	Solicit Contributions from Such Committee.		
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
	WEDGO HEALTH GOLO HONO INC. I	JEITIONE 7	to non commit tee (a.n.a.	Wedge Health (Me)
_	Full Name (Last, First, Middle Initial)			
Α.	MR TIMOTHY SWETT			Date of Receipt
	Mailing Address 8362 GOLDEN PRAIRI	E DRIVE		05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23498
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer	Occupation	า	-
	Name of Employer MEDCO HEALTH SOLUTIONS	VP/GM		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	405.00	
	Other (specify) ▼		485.00	
_	F. III Nove (Lock First Middle Letter)			
В.	Full Name (Last, First, Middle Initial) MS MARY THORSBY			Date of Receipt
	Mailing Address 17326 ELLEN DR			M M / D D / Y Y Y Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23514
	LIVONIA	MI	48152	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Tederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			SPECIAL MARKETS	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	700.00	
	cale. (epec.ij) 🔻	0 0		
_	Full Name (Last, First, Middle Initial)			
C.	MR WILLIAM TOBIN			Date of Receipt
	Mailing Address 838 COLONIAL RD			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23431
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	1
			FIT SYSTEMS SUPPORT	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		550.00	
	Other (specify)		333.33	
Г				
٩	UBTOTAL of Receipts This Page (optional)			150.00
\vdash	DE LA LOS TICOSIDIO TINO L'Age (optional)		<u> </u>	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 79 / 195
	EMIZED RECEIPTS	or each category of the		(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or i	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)
	Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER			Date of Receipt
	Mailing Address 713 INDIAN CREEK RD			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23572
	AMHERST	VA	24521	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR STA	TE GOVERNMENT AFFAIRS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	825.00	
	Cule (openity)	0 0		
_	Full Name (Last, First, Middle Initial) MR GARY TULLY			Date of Receipt
	Mailing Address 16 FIELDHEDGE DRIVE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	0 5 1 3 2 0 0 6 Transaction ID: INC:A:23702
	HILLSBOROUGH	NJ	08844	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		23.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		7
			NT SVC DELIVERY	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		275.00	
) .	Full Name (Last, First, Middle Initial) MS CARA VAN ZILE			Date of Receipt
	Mailing Address 31 LINCOLN RD			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23509
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANA	ı LYTICAL SVCS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		225.00	
SI	JBTOTAL of Receipts This Page (optional)			125.00

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 80 / 195
	· ·		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			_ common common, r age	13 14 15 16 17
Ar	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
\angle				
Α.	Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA			Date of Receipt
Λ.	Mailing Address W328 S4230 SPRING F	DIDGE		M M / D D / Y Y Y Y
	Walling Address W328 S4230 SFRING F	IIDGL		05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23762
	WAUKESHA	WI	53188	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		VP ACCI		_
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	250.00	
	Other (specify)	0 0		
	Full Name (Last, First, Middle Initial)			
В.	,			Date of Receipt
	Mailing Address 105 ARRANDALE RD			M M / D D / Y Y Y Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23558
	ROCKVILLE CENTRE	NY	11570	Amount of Each Receipt this Period
	FEC ID number of contributing	<u></u>		50.00
	federal political committee.	C		30.00
	Name of Employer	Occupation	n	┪
	Name of Employer MEDCO HEALTH SOLUTIONS	VP MKTI		
	Receipt For:		e Year-to-Date ▼	
	Primary General			
	Other (specify) ▼	1	550.00	
_	Full Name (Last, First, Middle Initial)			
C.	MR GORDON VICKERS			Date of Receipt
	Mailing Address 436 MOUNTAIN AVENU	JE		05 13 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23410
	WESTFIELD	NJ	07090	Amount of Each Receipt this Period
			07000	Amount of Each receipt this renou
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			CCT EXEC	_
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		275.00	
	Other (specify)			
_	LIDTOTAL of Descripts This Description in			95.00
L	UBTOTAL of Receipts This Page (optional)		······	
1				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 81 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may e and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT	TICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR DONALD VIDIC			Date of Receipt
	Mailing Address 611 REDWOOD CT	04-4-	7:- Onda	05 13 2006 2006
	,	State PA	Zip Code 16066	Transaction ID: INC:A:23566 Amount of Each Receipt this Period
	EEC ID as well as of a satisfaction	C		20.00
	MEDCO HEALTH SOLUTIONS SF		HARM OPS	
	Receipt For: Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 220.00	
3.	Full Name (Last, First, Middle Initial) MR MUNISH VIJ			Date of Receipt
	Mailing Address 2108 HENRY COURT			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	•	State	Zip Code	Transaction ID: INC:A:23739
	FFC ID soundhar of a satisfaction	NJ C	07430	Amount of Each Receipt this Period 25.00
	MEDOO HE'NI TH COLLITIONS	ccupation ECHNIC	AL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 275.00	
).	Full Name (Last, First, Middle Initial) MR DANIEL WALDEN			Date of Receipt
	Mailing Address 450 BEECHMONT DR			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State NY	Zip Code 10804	Transaction ID: INC:A:23626 Amount of Each Receipt this Period
	FFC ID according of a patrillocation	C	10004	192.31
	MEDOO HE'NI TH COLLITIONS	ccupation	ULATORY & MC PROGRA	MS
	Receipt For: Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 2115.41	
s	UBTOTAL of Receipts This Page (optional))	237.31
т.	OTAL This Period (last page this line number only).		•	

COLLEDING A (FEO Forms OV)				FOR LINE NUMBER: PAGE 82 / 195
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		(check only one)
ITEMIZED RECEIPTS		or each category of the		
			Detailed Summary Page	
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any personal distribution of the sold or used by any personal distribution of the sold or used by any personal distribution.	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE			Date of Receipt
	Mailing Address 5445 GOODWIN AVEN	UE		05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23741
	DALLAS	TX	75206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE	n S SEGMENT LEADER	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		0145.44	1
	Other (specify) ▼		2115.41	
В.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Date of Receipt
	Mailing Address 5 APPLE ORCHARD RD			M M / D D / Y Y Y
				05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23576
	MOORESTOWN	NJ	08057	Amount of Each Receipt this Period
	FEC ID number of contributing			10.50
	federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS	VP/GM		
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General			1
	Other (specify) ▼		262.50	
<u>с.</u>	Full Name (Last, First, Middle Initial) MS CATHERINE WASSON			Date of Receipt
	Mailing Address 26072 HARBOR VIEW			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23433
	CAPISTRANO BEACH	CA	•	
		UA	92624	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATL		
	Receipt For:		Year-to-Date ▼	\dashv
	Primary General	Ayyıeyale	, 16ai-10-Date ▼	1
	Other (specify)		550.00	
	Strict (specify) \		1 1 1 1 1 1 1	1
				254.81
LS	UBTOTAL of Receipts This Page (optional)		·····	201.01

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 83 / 195 (check only one)
•	LIMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MRS KELLY WEBBER			Date of Receipt
	Mailing Address 9 LOCUST ST	0	7: 0 1	05 13 2006
	City MONTVALE	State NJ	Zip Code 07645	Transaction ID: INC:A:23553 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORI	P HR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
3.	Full Name (Last, First, Middle Initial) MR MARK WEGRYN			Date of Receipt
	Mailing Address 867 STANDISH AVE			05 13 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23534
	MOUNTAINSIDE FEC ID number of contributing federal political committee.	C	07092	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR INTE	1 ERNAL BUSINESS DEV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
- .	Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH			Date of Receipt
	Mailing Address 309 WATERVIEW DR			05 13 2006
	City FRANKLIN LAKES	State NJ	Zip Code	Transaction ID: INC:A:23478
	FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period 192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES, C	EO ACCREDO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.41	
s	UBTOTAL of Receipts This Page (optional)			267.31
T	OTAL This Period (last page this line number on			

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 84 / 195
	·		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any perso	n for the purpose of soliciting contributions
\	NAME OF COMMITTEE (In Full)	aric ara aac	arcas of any political committee to	Solicit Contributions from Such Committee.
	MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a.	Modes Health BAC)
	MEDGO HEALTH SOLUTIONS INC. P	OLITICAL P	ACTION COMMITTEE (a.K.a	. Wedco Health FAC)
_	Full Name (Last, First, Middle Initial)			
A.	MR KENNETH WERMES			Date of Receipt
	Mailing Address 26037 N WRANGLER I	RD		05 13 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23547
	SCOTTSDALE	AZ	85255	Amount of Each Receipt this Period
			00200	
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:		Year-to-Date ▼	-
	Primary General	riggregate	Total to Bate V	
	Other (specify) ▼		825.00	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 2241 E. PINCHOT AVE #17F			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23425
	PHOENIX	AZ	85016	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		20.00
	Name of Employer	Occupation	 1	┪
	Name of Employer MEDCO HEALTH SOLUTIONS	DIR ACC		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		220.00	
	Other (specify)	0 0	220.00	
	Full Name (Last First Middle Initial)			
C.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON			Date of Receipt
	Mailing Address 1 RIVER COURT			M M / D D / Y Y Y Y
	APARTMENT 2809			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23531
	JERSEY CITY	NJ	07310	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	·			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		SULT SUPPORT • Year-to-Date ▼	_
	Primary General	Aygregate	: Teal-to-Date V	
	Other (specify)		550.00	
	,			'
s	UBTOTAL of Receipts This Page (optional)			145.00
\vdash	<u> </u>			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 85 / 195
ITEMIZED RECEIPTS		or each category of the	(check only one)
TEMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12
Any information penied from a sol Departs and Cto	tomonto mo	, not be cold or used by one norse	13 14 15 16 17
Any information copied from such Reports and Star or for commercial purposes, other than using the na	tements may ame and add	rnot be sold or used by any perso dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. PC	DI ITICAL A	ACTION COMMITTEE (a k a	Medco Health PAC)
/	, , , , , , , , , , , , , , , , , , , ,	1011011 001111111 122 (4.1144	· Modeo Fleakii F 7(e)
Full Name (Last, First, Middle Initial)			
MS BEVERLY WINKLER			Date of Receipt
Mailing Address 17 LYNWOOD RD			05 13 2006
City	State	Zip Code	
VERONA	NJ	21p Code 07044	Transaction ID: INC:A:23648
	INU	07044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
rederal political committee.			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		DRG DEV	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		275.00	
Other (specify)	1 1		
Full Name (Last, First, Middle Initial)			+
3. MS MARILYN WOLLETT			Date of Receipt
Mailing Address 8174 MT AIR PL			M M / D D / Y Y Y Y
			05 13 2006
City	State	Zip Code	Transaction ID: INC:A:23584
COLUMBUS	OH	43235	Amount of Each Receipt this Period
FEC ID number of contributing	C		25.00
federal political committee.			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		RM PRACTICE	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify)		525.00	
Other (specify)		1 1 1 1 1 1 1	
Full Name (Last, First, Middle Initial)			
MS ANNA WONG			Date of Receipt
Mailing Address 64-20 BELL BLVD			M M / D D / Y Y Y Y
C:t.	Ctoto	7in Codo	05 13 2006
City <u>B</u> AYSIDE	State NY	Zip Code 11364	Transaction ID: INC:A:23737
•		11304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	1	RED SOLUTIONS	_
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	, [
Other (specify)		550.00	
	-		
SUBTOTAL of Receipts This Page (optional)		.	100.00

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 86 / 195
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any perso	n for the purpose of soliciting contributions
<u>~</u>	NAME OF COMMITTEE (In Full)	Tarrio aria ade	political committee to	Solicit Contributions from Such Committee.
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a.	Medco Health PAC)
	MEDOO HEALTH SOLOTIONS INC. 1	OLITIOAL A	CHON COMMITTEL (a.K.a.	. Wedco Health FAO)
	Full Name (Last, First, Middle Initial)			
A.	MS JUDITH WOOD			Date of Receipt
	Mailing Address 76 COLONIAL ROAD			05 13 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23689
	STILLWATER	NY	12170	
		191	12170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			ACCT MGMT	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		275.00	
		0 0		'
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 554 CUMBERLAND AV	Έ		05 13 YYYY 2006
	City	State	Zip Code	Transaction ID: INC:A:23709
	TEANECK	NJ	07666	Amount of Each Receipt this Period
			07000	
	FEC ID number of contributing federal political committee.	C		25.00
		10 "		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		HNOLOGY • Year-to-Date ▼	_
	Primary General	Aygregate	: Teal-to-Date V	
	Other (specify)		275.00	
				'
_	Full Name (Last, First, Middle Initial)			
C.	MR SERGEY YANITSKIY			Date of Receipt
	Mailing Address 793 LINCOLN AVE			05 13 2006
	City	State	Zip Code	Transaction ID: INC:A:23465
	POMPTON LAKES	NJ	07442	Amount of Each Receipt this Period
	FEC ID number of contributing			05.00
	federal political committee.	C		25.00
	Name of Employer	Occupation	2	-
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST	
	Receipt For:		Year-to-Date ▼	_
	Primary General	33 3		1
	Other (specify) ▼		275.00	
_				
				75.00
S	UBTOTAL of Receipts This Page (optional)	·····	······································	75.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 87 / 195
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
_			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MS SARAH YINGLING			Date of Receipt
	Mailing Address 901 ST MARKS AVE			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23540
	WESTFIELD	NJ	07090	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	n DDUCT MGMT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
3.	Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR			Date of Receipt
	Mailing Address 219 SPOOK ROCK RD.			05 / 13 / 2006
	City	State	Zip Code	Transaction ID: INC:A:23608
	SUFFERN	NY	10901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-CO		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
Э.	Full Name (Last, First, Middle Initial) MS JILL ZELMAN			Date of Receipt
	Mailing Address 43604 EMERALD DUNES	S PL		05 13 YYYYY 2006
	City	State	Zip Code	Transaction ID: INC:A:23666
	LEESBURG	VA	20176	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CON	1 ISOLIDATION PLAN & RPR	<u></u>
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		217.28	
s	UBTOTAL of Receipts This Page (optional)			100.00
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	OTAL This Period (last page this line number onl	y)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 88 / 195
	EMIZED RECEIPTS		or each category of the	(check only one)	
••	LIMIZED HEOLII 13		Detailed Summary Page	X 11a 11b	11c 12
Δ.,	winformation conied from such Departs and State	amanta may	, not be cold or used by one norse	13 14 1	15 16 17
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and ado	frict be sold of used by any perso dress of any political committee to	solicit contributions from	sung contributions a such committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	I ITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)	
			(
	Full Name (Last, First, Middle Initial)				
Α.	MR ANTHONY ZOLFO			Date of Receipt	
	Mailing Address 726 HIGH MOUNTAIN F	ROAD		0 5 1 3	
	City	State	Zip Code	Transaction ID:	
	FRANKLIN LAKES	NJ	07417	Amount of Each R	
	FEC ID number of contributing		1 1 1 1 1 1	7 tillount of Euch 11	· · · · · ·
	federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
	Receipt For:	ASST CC	Year-to-Date V	_	
	Primary General	Aggregate	rear-to-Date V	,	
	Other (specify)		275.00		
				'	
	Full Name (Last, First, Middle Initial)				
В.	ELIZABETH S. FERGUSON			Date of Receipt	
	Mailing Address 540 HIGHLAND AVENU	E		0 5 1 8	
	City	Ctoto	Zip Code		
	City WESTFIELD	State NJ	•	Transaction ID:	
		INU	07090-3019	Amount of Each R	ecelpt this Period
	FEC ID number of contributing federal political committee.	C			2400.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
			ENERAL COUNSEL		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)	' '	2400.00		
	Sanor (oposiny) 🔻	1 1	1 1 1 1 1 1 1		
_	Full Name (Last, First, Middle Initial)				
C.	WILLIAM LAGOS			Date of Receipt	
	Mailing Address 11401 IVY HOMES PLA	CE		0 5 1 8	
	City	State	Zip Code		
	RICHMOND	VA	23233	Transaction ID: IN Amount of Each R	
		VA	20200	Amount of Each N	eceipi illis Fellou
	FEC ID number of contributing federal political committee.	C			1300.00
	·				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
			Y ACCOUNTS		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	. [
	Other (specify)	' '	1300.00		
	Canor (Speedily)		1 1 1 1 1 1 1		
	L			<u> </u>	
s	UBTOTAL of Receipts This Page (optional)				3725.00
\vdash				-	
T	OTAL This Period (last page this line number on	ly))		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 195 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or i	y information copied from such Reports and State or commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ANDREW MUNROE Mailing Address 34 BERKSHIRE ROAD City MAPLEWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General		Zip Code 07040 n ESIDENT AND COUNSEL e Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Other (specify) ▼		1300.00	
3.	Full Name (Last, First, Middle Initial) MARGERY F NATHANSON Mailing Address 100 WINSTON DRIVE, N City	IO 16C N	Zip Code	Date of Receipt M M
	CLIFFSIDE PARK FEC ID number of contributing federal political committee.	NJ C	07010	Amount of Each Receipt this Period 650.00
	Name of Employer MEDCO HEALTH SERVICES, IN- C. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ANT COUNSEL e Year-to-Date ▼ 650.00	
Э.	Full Name (Last, First, Middle Initial) JACK A. SMITH Mailing Address 21 DORCHESTER ROAL)		Date of Receipt 0 5 1 8 2 0 0 6
	City DARIEN FEC ID number of contributing	State CT	Zip Code 06820	Transaction ID: INC:A:23395 Amount of Each Receipt this Period 5000.00
	Name of Employer MEDCO HEALTH SOLUTIONS, INC. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation SR. V.P.	n MARKETING e Year-to-Date ▼ 5000.00	
SI	JBTOTAL of Receipts This Page (optional)			6950.00
T	OTAL This Period (last page this line number on	v)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 90 / 195
	EMIZED RECEIPTS		or each category of the	(check only one)
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۸r	by information copied from such Reports and State	monte may	ret be sold or used by any perso	
or	for commercial purposes, other than using the nar	me and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. POL	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR DAVID BAUGH			Date of Receipt
	Mailing Address 1813 ADONIS AVE			05 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24195
	HENDERSON	NV	89074	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
		Occupation MGR BE	n NEFIT DELIVERY SYSTEM:	3
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	' '	500.00	
	Other (specify) ▼	0 0		
3.	Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
	Mailing Address 2903 CHUKKAR COURT			M M / D D / Y Y Y Y
		. .		05 20 2006
	City	State	Zip Code	Transaction ID: INC:A:24072
	PLANT CITY	FL	33567	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	MEDOO HE'ALTH SOLLITIONS	Occupation VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)	' '	525.00	
	Office (Specify)	0 0		
Э. Э.	Full Name (Last, First, Middle Initial) MR WILLIS DINGLE			Date of Receipt
	Mailing Address 17826 ARBOR GREENE	DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	0 5 2 0 2 0 0 6 Transaction ID: INC:A:23957
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	MEDOO HE'ALTH SOLLITIONS	Occupation		7
		SR DIR F		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	' '	525.00	
		-		
s	UBTOTAL of Receipts This Page (optional)			75.00
			<u>*</u>	
T	OTAL This Period (last page this line number only	/))	

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 91 / 195
	·		Use separate schedule(s)	(check only one)	
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b	11c 12
			Detailed Guillinary Fage	13 14	15 16 17
An	y information copied from such Reports and Stat	tements may	not be sold or used by any perso	on for the purpose of solici	ting contributions
or i	or commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from	such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
_			·		
	Full Name (Last, First, Middle Initial)				
٩.	MS GEORGIA EDDLEMAN			Date of Receipt	
	Mailing Address 908 EDGEMEER LANE			05 20	2006
	City	Ctata	7in Codo		
	City	State	Zip Code	Transaction ID: IN	
	SOUTHLAKE	TX	76092	Amount of Each Re	eceipt this Period
	FEC ID number of contributing	C			34.45
	federal political committee.				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1		
	MEDCO HEALTH SOLUTIONS	VP/GM			
	Receipt For:	Aggregate	Year-to-Date V		
	Primary General	1 1		1	
	Other (specify) ▼		723.45		
				1	
	Full Name (Last, First, Middle Initial)				
	MR JOSEPH FRENDO			Date of Receipt	
	Mailing Address 9 GREEN HILL TRAIL			M M / D D	/ Y Y Y Y
	011	0	7: 0 1	05 20	2006
	City	State	Zip Code	Transaction ID: IN	IC:A:24078
	TROPHY CLUB	TX	76262	Amount of Each Re	eceipt this Period
	FEC ID number of contributing		76262	Amount of Each Re	
		C	76262	Amount of Each Re	50.00
	FEC ID number of contributing federal political committee.	C		Amount of Each Re	
	FEC ID number of contributing			Amount of Each Re	
	FEC ID number of contributing federal political committee.	Occupation VP/GM	1	Amount of Each Re	
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	Year-to-Date ▼	Amount of Each Re	
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation VP/GM	1	Amount of Each Re	
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation VP/GM	Year-to-Date ▼	Amount of Each Re	
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	Occupation VP/GM	Year-to-Date ▼		
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES	Occupation VP/GM Aggregate	Year-to-Date ▼	Amount of Each Re	
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	Occupation VP/GM Aggregate	Year-to-Date ▼	Date of Receipt	50.00
— C.	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TR	Occupation VP/GM Aggregate	Year-to-Date ▼ 1050.00	Date of Receipt M M M / D D 0 5 2 0	50.00
— C.	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TR	Occupation VP/GM Aggregate	Year-to-Date ▼ 1050.00 Zip Code	Date of Receipt M M M / D D D D D D D D D D D D D D D D	50.00 2006 C:A:24135
— C.	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TR	Occupation VP/GM Aggregate	Year-to-Date ▼ 1050.00	Date of Receipt M M M / D D 0 5 2 0	50.00 2006 C:A:24135
- .	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TR City HENDERSON FEC ID number of contributing	Occupation VP/GM Aggregate	Year-to-Date ▼ 1050.00 Zip Code	Date of Receipt M M M / D D D D D D D D D D D D D D D D	50.00 2006 C:A:24135
- .	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TE City HENDERSON	Occupation VP/GM Aggregate	Year-to-Date ▼ 1050.00 Zip Code	Date of Receipt M M M / D D D D D D D D D D D D D D D D	50.00 y y y y y y y y 2 0 0 6 IC:A:24135 eccipt this Period
- .	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TRUTH City HENDERSON FEC ID number of contributing federal political committee.	Occupation VP/GM Aggregate	Year-to-Date ▼ 1050.00 Zip Code 89052	Date of Receipt M M M / D D D D D D D D D D D D D D D D	50.00 y y y y y y y y 2 0 0 6 IC:A:24135 eccipt this Period
- .	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TR City HENDERSON FEC ID number of contributing	Occupation VP/GM Aggregate	Year-to-Date ▼ 1050.00 Zip Code 89052	Date of Receipt M M M / D D D D D D D D D D D D D D D D	50.00 y y y y y y y y 2 0 0 6 IC:A:24135 eccipt this Period
C .	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TRUTH City HENDERSON FEC ID number of contributing federal political committee.	Occupation VP/GM Aggregate RAIL State NV C Occupation VP/GM	Year-to-Date ▼ 1050.00 Zip Code 89052	Date of Receipt M M M / D D D D D D D D D D D D D D D D	50.00 y y y y y y y y 2 0 0 6 IC:A:24135 eccipt this Period
C .	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TR City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM Aggregate RAIL State NV C Occupation VP/GM	Zip Code 89052	Date of Receipt M M M / D D D D D D D D D D D D D D D D	50.00 y y y y y y y y 2 0 0 6 IC:A:24135 eccipt this Period
C .	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TE City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation VP/GM Aggregate RAIL State NV C Occupation VP/GM	Year-to-Date ▼ 1050.00 Zip Code 89052	Date of Receipt M M M / D D D D D D D D D D D D D D D D	50.00 y y y y y y y y 2 0 0 6 IC:A:24135 eccipt this Period
C .	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TR City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation VP/GM Aggregate RAIL State NV C Occupation VP/GM	Zip Code 89052	Date of Receipt M M M / D D D D D D D D D D D D D D D D	50.00 y y y y y y y y 2 0 0 6 IC:A:24135 eccipt this Period
C .	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TR City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation VP/GM Aggregate RAIL State NV C Occupation VP/GM	Zip Code 89052	Date of Receipt M M M / D D D D D D D D D D D D D D D D	50.00 2 0 0 6 C:A:24135 Exceipt this Period
D.	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TR City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	C Occupation VP/GM Aggregate RAIL State NV C Occupation VP/GM Aggregate	Zip Code 89052	Date of Receipt M M M / D D D 2 0 Transaction ID: IN Amount of Each Re	50.00 y y y y y y y y 2 0 0 6 IC:A:24135 eccipt this Period
D.	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TR City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Specify) Full	C Occupation VP/GM Aggregate RAIL State NV C Occupation VP/GM Aggregate	Zip Code 89052 Year-to-Date ▼ 316.68	Date of Receipt M M M / D D D 2 0 Transaction ID: IN Amount of Each Re	50.00 2 0 0 6 C:A:24135 Exceipt this Period

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 92 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persoress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III			Date of Receipt
	Mailing Address 1970 WOODLANDS PL			05 20 7 2006
	City POWELL	State OH	Zip Code	Transaction ID: INC:A:24055
	FEC ID number of contributing federal political committee.	C	43065	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	
3.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
	Mailing Address 800 SANDY TRAIL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24210
	KELLER FEC ID number of contributing federal political committee.	C	76248	Amount of Each Receipt this Period 10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	
).	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III			Date of Receipt
	Mailing Address 266 BRUSHY CREEK AV	/E		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City LAS VEGAS	State NV	Zip Code 89148	Transaction ID: INC:A:24036 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.85
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.05	
s	UBTOTAL of Receipts This Page (optional)			63.85

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 93 / 195
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EIVIIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and States for commercial purposes, other than using the i	atements may name and ado	not be sold or used by any persolates of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt
	Mailing Address 8362 GOLDEN PRAIRI	E DRIVE		05 20 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23974
	TAMPA	<u>FL</u>	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	1	485.00	
	Other (specify)	0 0	0 0 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Date of Receipt
	Mailing Address 5 APPLE ORCHARD R	D		05 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24052
	MOORESTOWN	NJ	08057	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		262.50	
	5 HAL (1 - 1 5' - 1 AK H 1 3' 1)			
C.	Full Name (Last, First, Middle Initial) MS MARILYN WOLLETT			Date of Receipt
	Mailing Address 8174 MT AIR PL			05 20 2006
	City	State	Zip Code	Transaction ID: INC:A:24060
	COLUMBUS	OH	43235	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		RM PRACTICE	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)	' '	525.00	
	Cuter (Specify) 🔻	0 0		
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s	UBTOTAL of Receipts This Page (optional)			87.50
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<u> </u>				FOR LINE NUMBER: PAGE 94 / 195
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		(check only one)
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			Detailed Summary Page	
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JOHN PATRICK DRISCOLL			Date of Receipt
	Mailing Address 6 TREMONT STREET			05 24 7 9 9
	City	State	Zip Code	Transaction ID: INC:A:23405
	COS COB	CT	06807	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation S.V.P. Pf	n RODUCT & BUSINESS DEV	ELOPMENT
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼	0 0	2500.00	
В.	Full Name (Last, First, Middle Initial) BRIAN T GRIFFIN			Date of Receipt
	Mailing Address 8 CEDAR AVENUE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23404
	ALLENHURST	NJ	07711-1034	
		INU	07711-1054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	n PRESIDENT	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General			1
	Other (specify) ▼	0 0	5000.00	
<u></u>	Full Name (Last, First, Middle Initial) SHAMUS MCGUIRE			Date of Receipt
٠.	Mailing Address 11 JARDINE CT.			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	
	MORRIS PLAINS	NJ	07950	Transaction ID: INC:A:23402 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer MEDCO HEALTH SOLUTIONS, INC.	Occupation SR. NAT	IONAL ACCOUNT EXEC.	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	500.00	
				2000 00
s	UBTOTAL of Receipts This Page (optional)		·····	8000.00

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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 95 / 195
IT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An	y information copied from such Reports and Stat	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	ress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	LITICALA	CTION COMMITTEE (a.k.a.	Madee Heelth DAC)
	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CHON COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial)			
A.	MS LUCILLE ACCETTA			Date of Receipt
	Mailing Address 11 ANDOVER CT			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:23969
	CORTLANDT MANOR	NY	10567	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		23.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS	SR DIR S	SALES & NATL ACCTS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	_ · · ·	275.00	
	Other (specify) ▼			
	Full Name (Last, First, Middle Initial)			
В.	MR EDWARD ADAMCIK			Date of Receipt
	Mailing Address 1021 SUNSET RIDGE			05 27 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23904
	BRIDGEWATER	NJ	08807	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS	VP PHAF	RM CONTRACT & CONSUL	ΓΙ <mark>NG</mark>
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
	Other (Specify)			
_	Full Name (Last, First, Middle Initial)			
C.	MR STEPHEN ADLER			Date of Receipt
	Mailing Address 139 BELLVALE LAKES F	RD		05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23951
	WARWICK	NY	10990	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		7
			TECHNOLOGY	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	550.00	
			0 0 0 0 0 0 0	'
	•			105.00
s	UBTOTAL of Receipts This Page (optional)		·····	125.00

SCHEDULE A (FEC Form 3X)

PAGE 96 / 195 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) MARENE ALLISON Date of Receipt Mailing Address 4405 WISMER ROAD 05 2006 27 City State Zip Code Transaction ID: INC:A:24231 **DOYLESTOWN** PA 18901 Amount of Each Receipt this Period FEC ID number of contributing 35.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP SECURITY & ASSET PROTECTION Aggregate Year-to-Date ▼ Receipt For: Primary General 385.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** MR JAMES ALLOCCO Date of Receipt Mailing Address 146 JOHNSON RD 0 5 27 2006 City Zip Code State Transaction ID: INC:A:24004 **SCARSDALE** NY 10583 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP INFO TECHNOLOGY Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) C. TEJWANSH ANAND Date of Receipt Mailing Address 10 WHIPPOORWILL LAKE ROAD 05 27 2006 Citv State Zip Code Transaction ID: INC:A:24206 **CHAPPAQUA** NY 10514 Amount of Each Receipt this Period FEC ID number of contributing 50.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP INFO TECHNOLOGY Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 97/195
ITEMIZED RECEIPTS	or each category of the	(check only one) X 11a 11b 11c 12
	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name ar	is may not be sold or used by any person and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
MEDGO HEALTH SOLUTIONS INC. POLITIC	CAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) DR ROGER ANDERSON		Date of Receipt
Mailing Address 833 OXFORD COURT		05 27 2006
City Sta	•	Transaction ID: INC:A:24226
<u>LEWISVILLE</u> TX	75056	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		192.30
MEDCO HEALTH SOLLITIONS	pation Carry Chief Pharmacist	
	regate Year-to-Date ▼	1
Primary General Other (specify) ▼	834.60	
Full Name (Last, First, Middle Initial) 3. MS JAYME ANTONOPLOS		Date of Receipt
Mailing Address 417 MILLS COURT		05 27 YYYY 2006
City Sta	'	Transaction ID: INC:A:24071
FLORHAM PARK NJ	07932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25.00
MEDOO HE'ALTH SOLLITIONS	upation EXEC CORR	
	regate Year-to-Date ▼	
Primary General Other (specify) ▼	275.00	
Full Name (Last, First, Middle Initial) C. MR DAVID ARCISZEWSKI		Date of Receipt
Mailing Address 20 CHADWELL PLACE		05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sta	te Zip Code	Transaction ID: INC:A:24019
MORRISTOWN NJ	07960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25.00
MEDOO HE'ALTH COLLITIONS	upation T COUNSEL	
	regate Year-to-Date ▼	
Primary General Other (specify) ▼	275.00	
SUBTOTAL of Receipts This Page (optional)	>	242.30
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X)			Library and a selection of the selection (s)	FOR LINE NUMBER: PAGE 98 / 195
•			Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, 0	13 14 15 16 17
Ar	y information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
17	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	5 HAL (1 - 5 - 1 ACH 1 - 1 - 1)			
Α.	Full Name (Last, First, Middle Initial) MS BECKIE BARATKO			Date of Receipt
۸.	Mailing Address 80 N. WOODLAND ST	REET		M M / D D / Y Y Y Y
	00 14. W 00 DE/ 114D 01			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24149
	<u>ENGLEWOOD</u> NJ		07631	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	N (5)	10 "		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Descipt For:		POSAL UNIT	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		275.00	
			0 0 0 0 0 0 0	
_	Full Name (Last, First, Middle Initial)			
В.	,			Date of Receipt
	Mailing Address 69 SKYLINE DR			M M / D D / Y Y Y Y
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24083
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	
	MEDCO HEALTH SOLUTIONS	VP INFO	TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	-	270.00	1
	Other (specify) ▼		270.00	
C.	Full Name (Last, First, Middle Initial) MR MICHAEL BARONE			Date of Receipt
٥.	Mailing Address 452 MEDWAY RD			M M / D D / Y Y Y Y
	Walling Addition 402 MEDWAT TO			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24237
	HIGHLAND HEIGHTS	OH	44143	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Employer	Occupation	•	_
	Name of Employer MEDCO HEALTH SOLUTIONS	GENERA		
	Receipt For:		Year-to-Date ▼	-
	Primary General	riggrogate		1
	Other (specify)		2750.00	
				1
s	UBTOTAL of Receipts This Page (optional)		.	325.00
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 99 / 195
TEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) MRS BRENDA BASSETT			Date of Receipt
Mailing Address 1752 BLACKSTONE D	RIVE		05 27 2006
City	State	Zip Code	Transaction ID: INC:A:24148
CARROLLTON 550 ID and the time	TX	75007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATL		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General		550.00	
Other (specify) ▼	0 0		
Full Name (Last, First, Middle Initial) MR DAVID BAUGH			Date of Receipt
Mailing Address 1813 ADONIS AVE	05 27 2006		
City	State	Zip Code	Transaction ID: INC:A:24196
HENDERSON	NV	89074	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MGR BE	n NEFIT DELIVERY SYSTEMS	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Cutor (opeony) •	0 0		
Full Name (Last, First, Middle Initial) MS PATRICE BAVARO			Date of Receipt
Mailing Address 9933 TOLEDO DRIVE	NORTH		05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC:A:24166
BROOKLYN PARK	MN	55443	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n MEDICARE OPS	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		275.00	
Canc. (opoon)) \	0 0	0 0 0 0 0 0 0	
SUBTOTAL of Receipts This Page (optional)	100.00		
TOTAL This Period (last page this line number of	only)	>	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 100 / 195
ITEMIZED RECEIPTS			or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	y information copied from such Reports and State	amente may	y not be sold or used by any person	
or	for commercial purposes, other than using the na	me and add	lress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
\angle	5 HAL			
Α.	Full Name (Last, First, Middle Initial) MR PETER BEGANS			Date of Receipt
	Mailing Address 1605 CHARNITA CT			M M / D D / Y Y Y Y
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24046
	VIENNA	VA	22182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			ERNMENT AFFAIRS	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	,
	Other (specify)	' '	1100.00	
	(4)			
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 24 GLENWOOD ROAD	05 27 2006		
	City	State	Zip Code	Transaction ID: INC:A:24209
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	
	MEDCO HEALTH SOLUTIONS	VP FINAI	NCE	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	· · ·	550.00	
	Other (specify)	-	0 0 0 0 0 0 0	1
_	Full Name (Last, First, Middle Initial)			
C.	MR ROBERT BENSON			Date of Receipt
	Mailing Address 304 BERKSHIRE AVE			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24081
	NEW MILFORD	NJ	07646	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.			30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	_
	MEDCO HEALTH SOLUTIONS	VP BENE	FIT DELIVERY SYSTEMS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	· ·	550.00	1
	Other (specify) ▼			1
	L			
s	UBTOTAL of Receipts This Page (optional)			200.00
\vdash	/			
Ιт	OTAL This Period (last page this line number onl	v)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 195 (check only one) X 11a 11b 11c 12
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO			
A. 3.	Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS Mailing Address 4273 BROGDAN FARM City BUFORD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) BRYAN BIRCH Mailing Address 4 WINDRUSH LANE	State GA C Occupation TECHNIC Aggregate	CAL SPECIALIST e Year-to-Date ▼ 275.00	Date of Receipt M M Z Z Z Z Z Z Z Z
	City WESTPORT FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: □ Primary □ General □ Other (specify) ▼		Zip Code 06880 n PRES, EMPLOYER GROUP e Year-to-Date ▼ 2112.00	Transaction ID: INC:A:24204 Amount of Each Receipt this Period 192.00
D.	Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN Mailing Address 50 NEW ENGLAND DR City RAMSEY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07446 on CLIENT & MKT PROG STRA e Year-to-Date ▼	Date of Receipt M M
s	UBTOTAL of Receipts This Page (optional)		······•	242.00
T	OTAL This Period (last page this line number on	lv))	

SCHEDULE A (FEC Form 3X)

TOTAL This Period (last page this line number only)

PAGE 102 / 195 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) MR KENNETH BODMER Date of Receipt Mailing Address 15 WEISS DR 05 2006 27 City State Zip Code Transaction ID: INC:A:24122 **TOWACO** 07082 NJ Amount of Each Receipt this Period FEC ID number of contributing 50.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation **GROUP VP FINANCE** Aggregate Year-to-Date ▼ Receipt For: Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. MR MICHAEL BOGDA Date of Receipt Mailing Address 80 LEONA CT 0 5 27 2006 City Zip Code Transaction ID: INC:A:24198 State **LEVITTOWN** NY 11756 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation TECHNICAL SPECIALIST Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) C. MR JOSEPH BOTTA Date of Receipt Mailing Address 109 ARBOR PL 05 2006 27 Citv State Zip Code Transaction ID: INC:A:23938 BRYN MAWR PA 19010 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP SALES Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 103 / 195
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN			Date of Receipt
Mailing Address 5259 FISHERCREST LN			05 27 2006
City	State	Zip Code	Transaction ID: INC:A:24154
RICHMOND	VA	23231	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FORM	NULARY CONSULTING	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	2200.00	
Full Name (Last, First, Middle Initial) 3. MS HEIDI BOWMAN			Date of Receipt
Mailing Address 15 DAWN LANE			05 27 YYYY 2006
City	State	Zip Code	Transaction ID: INC:A:24192
RINGWOOD	NJ	07456	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR H	ı ILTH MGMT	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		330.00	
Full Name (Last, First, Middle Initial) C. MS PATRICIA BRANUM			Date of Receipt
Mailing Address 210 FROG HOLLOW RC PO BOX 708	DAD		05 27 YYYY 2006
City	State	Zip Code	Transaction ID: INC:A:24144
COATESVILLE	PA	19320	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	ı & PROCESS ENGINEERIN	G G
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	650.00	
SUBTOTAL of Receipts This Page (optional)		·····	305.00
TOTAL This Period (last nage this line number only	lv)	.	

SCHEDULE A (FEC Form 3X)			lles esperate eshedule(e)	FOR LINE NUMBER: PAGE 104 / 195
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and State for commercial purposes, other than using the r	atements may	not be sold or used by any perso	n for the purpose of soliciting contributions
\		iaine and add	iless of any political committee to	Solicit Contributions from Such Committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO		ACTION COMMITTEE (a.k.a.	Madaa Haalth BAC\
	MEDGO HEALTH SOLUTIONS INC. P	JLITICAL F	ACTION COMMITTEE (a.K.a	. Wedco Health FAC)
	Full Name (Last, First, Middle Initial)			
A.	MR DAVID BREEN			Date of Receipt
	Mailing Address 27 SEALS DR			05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	
	City MONROE	NY	10950	Transaction ID: INC:A:24123
		INT	10950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	- Todoral political committee:			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			LYTICAL SVCS	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	275.00	
	Cure (epocis) 🔻	0 0	1 1 1 1 1 1 1	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 540 GIORDANO DRIVE	05 27 Y Y Y Y Y Y		
	City	State	Zip Code	
	YORKTOWN HEIGHTS	NY	10598	Transaction ID: INC:A:23935 Amount of Each Receipt this Period
		INI	10390	Amount of Each neceipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	·			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		NESS REQUIREMENTS Year-to-Date ▼	_
	Primary General	Aggregate	r rear-to-Date ▼	
	Other (specify)		550.00	
_	Full Name (Last, First, Middle Initial)			
C.	MS VIVIAN BULGER			Date of Receipt
	Mailing Address 120 EAST MAIN ST			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24121
	WASHINGTONVILLE	NY	10992	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		20.00
	Name of Employer	Occupation	<u> </u>	4
	Name of Employer MEDCO HEALTH SOLUTIONS	SR DIR F		
	Receipt For:		Year-to-Date ▼	_
	Primary General	30 13140		1
	Other (specify) ▼		220.00	
				05.00
s	UBTOTAL of Receipts This Page (optional)		······	95.00

SCHEDIII E A (EEC Form 3V)				FOR LINE NUMBER: PAGE 105 / 195	
	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)	
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12	
			Detailed Summary Page	13 14 15 16 17	
۸r	y information copied from such Reports and Sta	ntomonte may	y not be cold or used by any norse		
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.	
abla	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)	
Α.	Full Name (Last, First, Middle Initial) MR KEVIN BURON			Date of Receipt	
	Mailing Address 301 TEMPLETON CT	05 27 2006			
	City	State	Zip Code	Transaction ID: INC:A:24022	
	GRANITE BAY	CA	95746	Amount of Each Receipt this Period	
		<u> </u>	507.10	Amount of Each recorpt this remod	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General	1 1	075.00	1	
	Other (specify) ▼		275.00		
В.	Full Name (Last, First, Middle Initial) MRS PEGEEN BUTTERFIELD			Date of Receipt	
	Mailing Address 23 NUTTING PLACE	05 27 Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: INC:A:23959	
	WEST CALDWELL	NJ	07006	Amount of Each Receipt this Period	
		110	07000	Amount of Each receipt this renou	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR N	n MEMBER STRATEGY		
	Receipt For:	Aggregate	Year-to-Date ▼	7	
	Primary General			1	
	Other (specify) ▼		275.00		
	Full Name (Last, First, Middle Initial)			+	
C.	MRS DOREEN CALDER			Date of Receipt	
	Mailing Address 441 S ELM STREET			05 27 2006	
	City	State	Zip Code	Transaction ID: INC:A:23890	
	MAYWOOD	NJ	07607	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		40.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		7	
		MEDCO HEALTH SOLUTIONS DIR BUSINESS REQUIREMENTS			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		440.00	11	
	Other (specify)		440.00		
_					
s	UBTOTAL of Receipts This Page (optional)			90.00	
\vdash	,			-	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 106 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)	LITIOAL	ACTION COMMITTEE ()	Marker Hardy BAO
	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
_	Full Name (Last, First, Middle Initial)			Data of Daggint
Α.	MR RAYMOND CARLUCCI Mailing Address 24 SHERI DRIVE			Date of Receipt
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24115
	ALLENDALE FEO. 12 August 1	NJ	07401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		52.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n NL MGR GROUP	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	577.50	
		0 0	0 0 0 0 0 0 0	
R	Full Name (Last, First, Middle Initial) MS MARY CASALE			Date of Receipt
υ.	Mailing Address 822 CEDAR AVE	M M / D D / Y Y Y Y		
				05 27 2006
	City HADDENFIELD	State NJ	Zip Code 08033	Transaction ID: INC:A:24025
	FEC ID number of contributing		00000	Amount of Each Receipt this Period
	federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
C.	Full Name (Last, First, Middle Initial) MS KAREN CATHCART RUSSELL			Date of Receipt
	Mailing Address 148 CLUBHOUSE DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23907
	WEST COLUMBIA	SC	29172	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		7
	Receipt For:		CLINICAL SVCS • Year-to-Date ▼	_
	Primary General	Aggregate		1
	Other (specify) ▼		215.00	
_				<u> </u>
1	UBTOTAL of Receipts This Page (optional)			102.50

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 107/195
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b] 11c	
			, -	13 14	15 16 17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	itements may name and add	not be sold or used by any person dress of any political committee to	n for the purpose of solici solicit contributions from	ting contributions such committee.
\setminus	NAME OF COMMITTEE (In Full)				
	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)	
A.	Full Name (Last, First, Middle Initial) MR JOSEPH CONOSHENTI, JR			Date of Receipt	
	Mailing Address 5 MAGNOLIA DRIVE			0 5 D D D D D D D D D D D D D D D D D D	2006
	City	State	Zip Code	Transaction ID: IN	C:A:23913
	MARLBORO	NJ	07746	Amount of Each Re	ceipt this Period
FEC ID number of contributing federal political committee.				25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		275.00		
В.	Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE			Date of Receipt	
	Mailing Address 130 WEST 67TH STREET, #4J			05 / 27	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24218
	NEW YORK	NY	10023	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS PLANNING & DE	V	
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		275.00		
<u> </u>	Full Name (Last, First, Middle Initial) MR ROBERT COOK			Date of Receipt	
٠.	Mailing Address 270 S FRANKLIN TURN	IPIKE		M M / D D	
	City	State	Zip Code	05 27	2006
	RAMSEY	NJ	21p Code 07446	Transaction ID: IN Amount of Each Re	
	FEC ID number of contributing			7 WHOCH OF EACH TO	
	federal political committee.	С			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HLT	n H CARE OPS-TECHNOLOG	Y	
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	-	275.00		
_	Other (specify) ▼	0 0			
s	UBTOTAL of Receipts This Page (optional)		·····		75.00
TOTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 108 / 195
	· ·		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any person	on for the purpose of soliciting contributions
<u> </u>	NAME OF COMMITTEE (In Full)	aric aria aac	iress of any political committee to	Solicit contributions from such committee.
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a k a	Medco Health PAC)
_				
	Full Name (Last, First, Middle Initial)			Date of Descipt
٦.	MR STEPHEN COURTMAN Mailing Address 25 FAIRWAY TRAIL			Date of Receipt
	Mainig / Ida i			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24005
	<u>SPARTA</u>	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.			
Name of Employer MEDCO HEALTH SOLUTIONS OCCUPATIONS				
			RMACY NETWORK MGMT	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	275.00	
	(cpcs.,), \		0 0 0 0 0 0 0	1
	Full Name (Last, First, Middle Initial)			
3.	MS ROSELIN DANIEL	_		Date of Receipt
	Mailing Address 17 DEVONSHIRE DRIVI	05 27 2006		
	City	Transaction ID: INC:A:24096		
	RANDOLPH	NJ	07869	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		23.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS	SR DIR E	BENEFIT DELIVERY SYS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		275.00	
	Other (specify)		1 1 1 1 1 1 1	
	Full Name (Last, First, Middle Initial)			
Э.	MR KENNETH DANIELS			Date of Receipt
	Mailing Address 2903 CHUKKAR COURT	Г		05 27 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24073
			33567	
	PLANT CITY	FL		Amount of Each Receipt this Period
				Amount of Each Receipt this Period
	PLANT CITY FEC ID number of contributing federal political committee.	C		25.00
	FEC ID number of contributing federal political committee.	C		
	FEC ID number of contributing			
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation VP/GM		
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation VP/GM	n Year-to-Date ▼	
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation VP/GM	1	
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation VP/GM	n Year-to-Date ▼	
S	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation VP/GM Aggregate	Year-to-Date ▼ 525.00	75.00
S	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	Occupation VP/GM Aggregate	Year-to-Date ▼ 525.00	75.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 109 / 195
	ITEMIZED RECEIPTS		or each category of the	(check only one)
••	LIMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	y information copied from such Reports and Sta	atomonte may	y not be sold or used by any perso	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Lock First Affalls Lattice)			
A.	Full Name (Last, First, Middle Initial) MS MARY DASCHNER			Date of Receipt
	Mailing Address 2926 EWING AVE S			M M / D D / Y Y Y Y
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:23985
	MINNEAPOLIS	MN	55416	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		ENERAL MGR MEDICARE Year-to-Date ▼	
	Primary General	Aygregate	rear-to-date V	1
	Other (specify) ▼	1	2115.30	
ь	Full Name (Last, First, Middle Initial)			Date of Deceipt
В.	MRS EDITH DAVIS Mailing Address 386 WHITTIER AVENU			Date of Receipt
	Walling Address 500 WHITTIEN AVENU	_		05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24045
	DUNELLEN	NJ	08812	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	
		SR DIR F		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
	caller (epochij) 🔻	0 0	1 1 1 1 1 1 1	
_	Full Name (Last, First, Middle Initial)			
C.	MR DANIEL DAVISON			Date of Receipt
	Mailing Address 402 HIGHLAND AVE			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24116
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.			30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	<u> </u>	7
	MEDCO HEALTH SOLUTIONS	VP PRIC	ING	
	Receipt For:	Aggregate	Year-to-Date ▼	
Primary General			550.00	1
	Other (specify) ▼			1
	L			
s	UBTOTAL of Receipts This Page (optional)			267.30
\vdash	,			
Ιт	OTAL This Period (last page this line number o	nlv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 110 / 195
IT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
-			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS			Date of Receipt
	Mailing Address W62 N1032 FAIRHAVEN			05 27 7 2006
	CEDARRUBC	State WI	Zip Code	Transaction ID: INC:A:24047
	CEDARBURG FEC ID number of contributing federal political committee.	C	53012	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
3.	Full Name (Last, First, Middle Initial) MR PAUL DENIS			Date of Receipt
	Mailing Address 101 HALIFAX ROAD			05 27 7 2006
	City MAHWAH	State NJ	Zip Code	Transaction ID: INC:A:24131
		INU	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CON	n FRACT ADMINISTRATOR	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1100.00	
) .	Full Name (Last, First, Middle Initial) MS KAREN DEZEARN			Date of Receipt
	Mailing Address 3625 PATTERSTONE DF	₹		05 / 27 / 4 2006
	City	State	Zip Code	Transaction ID: INC:A:23909
	ALPHARETTA FEG. ID number of contributions	GA	30022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	MEDCO HE'ALTH SOLLITIONS		. ACCT EXEC	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	275.00	
S	UBTOTAL of Receipts This Page (optional)		·····	150.00
т,	This Period (last nage this line number only	v)		

91	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 111 / 195
	` '	Use separate schedule(s) or each category of the		(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
			Bottanou Guillinary i ago	13 14 15 16 17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and ado	not be sold or used by any persol dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR WILLIS DINGLE			Date of Receipt
	Mailing Address 17826 ARBOR GREEN	IE DR		05 27 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23958
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR H		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		525.00	7
	Other (specify) ▼		323.00	
— В.	Full Name (Last, First, Middle Initial) MR ROBERT DOLAN			Date of Receipt
	Mailing Address 9 CRANE AVENUE			05 27 2006
	City	State	Zip Code	
	WEST CALDWELL	NJ	07006	Transaction ID: INC:A:24097
		INU	07000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		EFIT DELIVERY SYSTEMS Year-to-Date ▼	<u>) </u>
	Primary General	Aggregate	e Year-IO-Dale ▼	-
	Other (specify) ▼	0 0	275.00	
<u>. </u>	Full Name (Last, First, Middle Initial) MS MERIDITH DORNER			Date of Receipt
٠.	Mailing Address 4448 CREEK ROAD			M M / D D / Y Y Y Y
	0::		7' 0 1	05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:23921
	ALLENTOWN	PA	18104	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		275.00	1
	Other (specify)	0 0	275.00	1
٩	UBTOTAL of Receipts This Page (optional)			75.00
\vdash	ODITION OF THE CEIPIS THIS FAGE (OPHONAI)			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 112 / 195	
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
Full Name (Last, First, Middle Initial) MR H.RONALD DRIZIN Mailing Address 17 DAYBREAK			Date of Receipt	
	Ctata	7'n Oada	05 27 2006	
City IRVINE	State CA	Zip Code 92614	Transaction ID: INC:A:24155 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CON	n TRACT ADMINISTRATOR		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00		
Full Name (Last, First, Middle Initial) MICHEL DUFRESNE			Date of Receipt	
Mailing Address 58 INDEPENDENCE W	Mailing Address 58 INDEPENDENCE WAY			
City MORRIS TWP	State NJ	Zip Code 07960	Transaction ID: INC:A:24212	
FEC ID number of contributing federal political committee.	C	07900	Amount of Each Receipt this Period 192.30	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	n TECHNOLOGY		
Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2115.30		
Full Name (Last, First, Middle Initial) C. MR DANA DUNCAN			Date of Receipt	
Mailing Address 72 HALLEY DR			05 27 2006	
City POMONA	State NY	Zip Code 10970	Transaction ID: INC:A:24028	
FEC ID number of contributing federal political committee.	C	10970	Amount of Each Receipt this Period 25.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ENG	n GINEERING		
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 275.00		
SUBTOTAL of Receipts This Page (optional)			267.30	
TOTAL This Period (last page this line number o	nly)	_		

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 113 / 195
	•	Use separate schedule(s) or each category of the		(check only one)
ITEMIZED RECEIPTS		Detailed Summary Page		X 11a 11b 11c 12
			Detailed Guillinary Fage	13 14 15 16 17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR YAACOV DUSHEK			Date of Receipt
	Mailing Address 312 MEGAN CT			05 27 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24088
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		BENEFIT DELIVERY SYS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	275.00	1
	Other (specify)			1
— В.	Full Name (Last, First, Middle Initial) MS GEORGIA EDDLEMAN			Date of Receipt
	Mailing Address 908 EDGEMEER LANE			M M / D D / Y Y Y Y
	-		05 27 2006	
	City	State	Zip Code	Transaction ID: INC:A:24180
	SOUTHLAKE	TX	76092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		34.45
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	١	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		723.45	1
	Other (specify)	0 0	723.43]
<u>с.</u>	Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS			Date of Receipt
	Mailing Address 109 KAREN PLACE			05 27 YYYY 2006
	City	State	Zip Code	Transaction ID: INC:A:23934
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	275.00	1
	Other (specify)		275.00	1
_				
				84.45
S	UBTOTAL of Receipts This Page (optional)			VP.P0
1				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 114 / 195
ıт	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIMIZED RECEIL 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and Stateme	ents may	not be sold or used by any perso	
or	for commercial purposes, other than using the name	and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. POLIT	TCAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
\angle	Full Name (Last, First, Middle Initial)			1
A.	MR EDWARD EISENBERG, MD			Date of Receipt
	Mailing Address 128 SUMMIT AVENUE			M M / D D / Y Y Y Y
	-			05 27 2006
	•	State	Zip Code	Transaction ID: INC:A:24225
		۱J	07043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			40.00
	MEDOO HE'AI TH SOLLITIONS	cupation UTILI	1 ZATION MGMT	
	Receipt For: Ag	ggregate	e Year-to-Date ▼	
	Primary General		425.00	
	Other (specify) ▼	1 1	423.00	
— В.	Full Name (Last, First, Middle Initial) MR FREDERICK ELSTON			Date of Receipt
	Mailing Address 106 GRAHAM TERRACE			05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24089
	SADDLE BROOK N	۸J	07663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			25.00
	MEDOO HE'AI TH SOLLITIONS	cupation ECHNIC	n CAL SPECIALIST	
	Receipt For: Ag	ggregate	Year-to-Date ▼	
	Primary General	1 1	275.00	
	Other (specify) ▼	0 0	270.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN			Date of Receipt
•	Mailing Address 359 LONG HILL ROAD EAS	ST		M M / D D / Y Y Y Y
				05 27 2006
City State		Zip Code	Transaction ID: INC:A:24229	
		<u>VY</u>	10510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			40.00
	MEDCO HEALTH SOLUTIONS VF	cupation CORI	n P COMMUNICATIONS	
		ggregate	Year-to-Date ▼	
	Primary General		440.00	
	Other (specify) ▼			
s	UBTOTAL of Receipts This Page (optional)			105.00
\vdash			•	
T	OTAL This Period (last page this line number only) .		>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 195 (check only one) X 11a 11b 11c 12
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	v not be sold or used by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN			
Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN Mailing Address 75 TWEED BLVD City UPPER GRANDVIEW FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		P MEDICAL&ANLYTC AFFR e Year-to-Date ▼ 1320.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR YAKOV ESTERLIS Mailing Address 25 STONEHEDGE City WEST NYACK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NY C Occupation SR DIR B	Zip Code 10994 n BENEFIT DELIVERY SYS e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR EDWARD FARGIS Mailing Address 216 ELMWOOD A City HO-HO-KUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation COUNSE		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	al)	······	170.00
TOTAL This Period (last page this line nun	nber only)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 116 / 195 (check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	
				13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may me and add	r not be sold or used by any perso Iress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. POL	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) DR RICHARD FEIFER			Date of Receipt
	Mailing Address 32 EILEEN DR			05 27 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23990
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	MEDOO HE'AI TH SOLLITIONS	Occupation VP CLINI	CAL SVCS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		550.00	
	Other (specify) ▼		550.00	
В.	Full Name (Last, First, Middle Initial) MR THOMAS FEITEL			Date of Receipt
	Mailing Address 58 APPLE HILL DR			05 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	Zip Code	Transaction ID: INC:A:24023	
	GILLETTE	NJ	07933	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.23
	MEDCO HEALTH SOLLITIONS	Occupation SVP COF	RP MKTG & E-COMM	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		2114.53	
C .	Full Name (Last, First, Middle Initial) MR THOMAS FERRAZZANO			Date of Receipt
	Mailing Address 138 HEIGHTS ROAD			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24117
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	MEDOO HE'AI TH SOLLITIONS	Occupation TECHNIC	n CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)			267.23

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 117 / 195
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An	y information copied from such Reports and State	ements may	γ not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a k a	Medco Health PAC)
<u>/</u>				
۹.	Full Name (Last, First, Middle Initial) MR EDWARD FISCHER			Date of Receipt
	Mailing Address 465 OLD STONE RD			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:23980
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MEDI	CARE OPS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
 3.	Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS			Date of Receipt
	Mailing Address 1933 MT. OLIVE AGOSTA ROAD			05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24064
	NEW BLOOMINGTON	OH	43341	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR H	n HLTH CARE OPS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
— Э.	Full Name (Last, First, Middle Initial) MR KEVIN FRANCO			Date of Receipt
	Mailing Address 140 BELLAIR RD UNIT Q			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24132
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	
S	UBTOTAL of Receipts This Page (optional)			70.00
T	OTAL This Period (last page this line number onl	y)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 118 / 195	
ITEMIZED RECEIPTS		or each category of the	(check only one)	
TI EMIZED TIEGEII TO		Detailed Summary Page	X 11a	
			13 14 15 16 17	
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements may name and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
Full Name (Last, First, Middle Initial) A. MR JOSEPH FRENDO			Date of Receipt	
Mailing Address 9 GREEN HILL TRAIL			05 27 2006	
City	State	Zip Code	Transaction ID: INC:A:24079	
TROPHY CLUB	TX	76262	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	7	
Receipt For:	Aggregate	e Year-to-Date ▼		
Primary General	1 1		1	
Other (specify) ▼		1050.00		
			A Committee of the Comm	
Full Name (Last, First, Middle Initial) B. MR ANDREW FRIEDELL			Date of Receipt	
Mailing Address 55 WHEELER			M M / D D / Y Y Y Y	
			05 27 2006	
City	State	Zip Code	Transaction ID: INC:A:23950	
<u>EDGEWOOD</u>	RI	02905	Amount of Each Receipt this Period	
FEC ID number of contributing				
federal political committee.	C		30.00	
Name of Employer	Occupation	 n	-	
Name of Employer MEDCO HEALTH SOLUTIONS		POLICY & ANALYSIS		
Receipt For:	-1	e Year-to-Date ▼	_	
Primary General	1.99.19		1	
Other (specify)		330.00		
		0 0 0 0 0 0 0		
Full Name (Last, First, Middle Initial) C. MR JOSEPH GALARDI			Date of Receipt	
			M M / D D / Y Y Y Y	
Mailing Address 24 MOREHOUSE PL	Mailing Address 24 MOREHOUSE PL			
City	State	Zip Code	Transaction ID: INC:A:23882	
NEW PROVIDENCE	NJ	07974	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	ID number of contributing			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MANAGI	n NG COUNSEL		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼		
		550.00	1	
		550.00		
SUBTOTAL of Receipts This Page (optional)			130.00	
SOBIOTAL OF RECEIPTS THIS Page (Optional)				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 195 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may ime and add	not be sold or used by any persodress of any political committee to	for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI Mailing Address 333 N. CANAL ST. #1804 City CHICAGO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State IL C C C C C C C C C C C C C C C C C C C		Date of Receipt M M
3.	Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO Mailing Address 69 LAKEVIEW DR City OLD TAPPAN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		Zip Code 07675	Date of Receipt M M
D .	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MICHAEL GALVIN Mailing Address 4 LONE PINE LANE City WESTPORT	State CT	Zip Code 06880	Date of Receipt M M M
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Other (specify)	Occupation SVP/CHI		125.00
s	UBTOTAL of Receipts This Page (optional)		······	275.00
T	OTAL This Period (last page this line number on	v)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 120 / 195 (check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO			
۹.	Full Name (Last, First, Middle Initial) MR PETER GAYLORD			Date of Receipt
	Mailing Address 1201 BRIDGE STREET			05 27 2006
	City ASBURY PARK	State NJ	Zip Code 07712	Transaction ID: INC:A:23881
	FEC ID number of contributing federal political committee.	C	07/12	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		NCIAL EVALUATIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
3.	Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA			Date of Receipt
	Mailing Address 20 BROOKSHIRE DR			05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ROBBINSVILLE	State	Zip Code	Transaction ID: INC:A:23956
	FEC ID number of contributing federal political committee.	NJ C	08691	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	L MGR GROUP	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
).	Full Name (Last, First, Middle Initial) MR THOMAS GILSON			Date of Receipt
	Mailing Address 2 PELL FARM ROAD			05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC:A:24187 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		2115.41	
s	UBTOTAL of Receipts This Page (optional)			292.31

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 121 / 195		
•		Use separate schedule(s) or each category of the		(check only one)		
ITEMIZED RECEIPTS		Detailed Summary Page		X 11a 11b 11c 12		
				13 14 15 16 17		
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)					
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MS MICHELE GLYNN			Date of Receipt		
	Mailing Address 26 FURMAN CT			05 27 Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:24100		
	MAHWAH	NJ	07430	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS		PRODUCT MGMT			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00			
— В.	Full Name (Last, First, Middle Initial) MR JAMES GORMAN			Date of Receipt		
	Mailing Address 11 WASHBURN RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:23930		
	CANTON	CT	06022	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	n CLIENT & MKT PROG STRA	AT		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼ 275.00	1		
	Other (specify)			1		
<u>С</u> .	Full Name (Last, First, Middle Initial) MR JAMES GRANT, JR			Date of Receipt		
	Mailing Address 1928 BEVERLY LANE			05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:23970		
	BUFFALO GROVE	IL	60089	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL	n NCIAL INSIGHTS			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼	0 0	275.00			
s	UBTOTAL of Receipts This Page (optional)		__	75.00		
\vdash	. 3 (1)			-		

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 122 / 195			
,		Use separate schedule(s)		(check only one)			
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page		X 11a 11b 11c 12			
			Detailed Garrinary Fage	13 14 15 16 17			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements may name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MR EDWARD GRIX			Date of Receipt			
	Mailing Address 525 ORANGEBURG RI)		05 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: INC:A:23992			
	PEARL RIVER	NY	10965	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS		E-COM BUSINESS OPS				
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	7			
	Other (specify) ▼	0 0	265.00				
<u> </u>	Full Name (Last, First, Middle Initial) MS GINA GRUHN			Date of Receipt			
	Mailing Address 13 WEATHER VANE D	RIVE		05 27 YYYY 2006			
	City	State	Zip Code	Transaction ID: INC:A:24018			
	CONVENT STATION	NJ	07960	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE					
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		275.00]			
<u> </u>	Full Name (Last, First, Middle Initial) MR RICHARD GUIOR			Date of Receipt			
	Mailing Address 50 BELLEVUE AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: INC:A:23896			
	SUMMIT	NJ	07901	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		90.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACC1					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	990.00				
	LIPTOTAL of Descints This Dans (actions)			140.00			
S	UBTOTAL of Receipts This Page (optional)						

91	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 123 / 195			
,		Use separate schedule(s) or each category of the		(check only one)			
ITEMIZED RECEIPTS		Detailed Summary Page		X 11a 11b 11c 12			
				13 14 15 16 17			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MR MARK HALLORAN			Date of Receipt			
	Mailing Address 19 KINGS RIDGE ROAL	D		05 27 2006			
	City	State	Zip Code	Transaction ID: INC:A:24090			
	LONG VALLEY	NJ	07853	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	С		80.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF IN	n IFO OFFICER				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General		880.00	7			
	Other (specify)	0 0	000.00	1			
— В.	Full Name (Last, First, Middle Initial) MR GREGORY HANSEN			Date of Receipt			
	Mailing Address 1659 ISABELLA PARKV	VAY		M M / D D / Y Y Y Y			
		05 27 2006					
	City	State	Zip Code	Transaction ID: INC:A:24190			
	CHASKA	MN	55318	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation					
			SVCS & ADMIN				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_			
	Other (specify) ▼		550.00				
	Full Name (Last, First, Middle Initial) MS KELLY HANZAWA			Date of Receipt			
٠.	Mailing Address 1116 OAKCROFT LANE			M M / D D / Y Y Y Y			
				05 27 2006			
	City	State	Zip Code	Transaction ID: INC:A:24158			
	SOMERSET	NJ	08873	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT REQUIREMENTS	7			
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		075.00	1			
	Other (specify)		275.00	1			
	IIDTOTAL of Descipto This David (anti- and)			155.00			
S	UBTOTAL of Receipts This Page (optional)						

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SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 124 / 195							
•			Use separate schedule(s) or each category of the		(check only one)						
ITEMIZED RECEIPTS			Detailed Summary Page		11a	\rightarrow	11b	_	11c	12	
Λ	vinformation against from such December 2011	omonto ====	, not be cold as used but seems and	n fair	the pur		14		15	16	17
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	rnot be sold or used by any perso Iress of any political committee to	solic	tne puri it contrib	pose outior	of soi ns fror	n suc	g contrii ch comi	outions mittee.	5
\setminus	NAME OF COMMITTEE (In Full)										
	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Me	dco He	ealth	PAC	;)			
Α.	Full Name (Last, First, Middle Initial) MR PETER HARTY				Date of	f Rec	eipt				
	Mailing Address 19520 YELLOW WING (COURT			м м 0 5	/	2	7		200	
	City	State	Zip Code		Transa	ction	ID:	NC:	A:238	83	
	COLORADO SPRINGS	CO	80908	-	Amour	nt of E	Each F	Recei	pt this I	Period	
	FEC ID number of contributing federal political committee.	C								192.3	31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP POLIC									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1889.24								
— В.	Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD				Date of	f Rec	eipt				
	Mailing Address 13210 N. 11TH AVE.				05 27 2006						
	City	State	Zip Code		Transa	ction	ID:	NC:	A:239	39	
	PHOENIX	AZ	85029	-	Amour	nt of E	Each F	Recei	pt this I	Period	
	FEC ID number of contributing federal political committee.	C								25.0	00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR SALI									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		275.00								
<u> </u>	Full Name (Last, First, Middle Initial) MR SCOTT HELMUS				Date of	f Rec	eipt				
	Mailing Address 23 VALLEY RD						2			200	
	City	State	Zip Code		Transa	ction	ID:	NC:	A:239	23	
	SUCCASUNNA	NJ	07876		Amour	nt of E	Each F	Recei	pt this I	Period	
	FEC ID number of contributing federal political committee.								50.0	00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHAF	n RMACIES								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00								
s	UBTOTAL of Receipts This Page (optional)			<u> </u>						267.3	1

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 125 / 195
ITEMIZED RECEIPTS			or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and ado	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR ERIC HESS			Date of Receipt
	Mailing Address 10 CARLTON RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23982
	FLANDERS	NJ	07836	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENGI	n NEERING & OPS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		440.00	
3.	Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON			Date of Receipt
	Mailing Address 1 HERITAGE RD			05 / 27 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24062
	FLORHAM PARK	NJ	07932	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:		Year-to-Date ▼	1
	Primary General Other (specify) ▼		550.00	
	Full Name /Last First Middle Initial			
Э.	Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN			Date of Receipt
	Mailing Address 974 HILLCREST ROAD			05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24134
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FACIL	LITIES	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		330.00	
s	UBTOTAL of Receipts This Page (optional)	120.00		
т	OTAL This Period (last page this line number onl	v)	>	
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 126 / 195
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may name and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) A. MR TIMOTHY HOGAN			Date of Receipt
Mailing Address 9 HIRLE ST			05 27 2006
City	State	Zip Code	Transaction ID: INC:A:23995
CORNWALL ON HUDSON FEC ID number of contributing federal political committee.	C	12520	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CAL SPECIALIST	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK			Date of Receipt
Mailing Address 49 S HILLSIDE AVE			05 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ELMSFORD	State NY	Zip Code	Transaction ID: INC:A:24086
FEC ID number of contributing		10523	Amount of Each Receipt this Period
federal political committee.	C		80.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INTE	n RVENTION DELIVERY SYS	<u></u>
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		880.00	
Full Name (Last, First, Middle Initial) MR WALTER HOSP			Date of Receipt
Mailing Address 1 OLD LANE			05 / 27 / 2006
CARSDALE	State NY	Zip Code	Transaction ID: INC:A:24039
SCARSDALE FEC ID number of contributing		10583	Amount of Each Receipt this Period
federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP TREA	ASURY	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify) 🔻		250.00	
SUBTOTAL of Receipts This Page (optional)	130.00		
TOTAL This Period (last page this line number of	nly)	>	

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 127 / 195			
•		Use separate schedule(s) or each category of the		(check only one)			
ITEMIZED RECEIPTS		Detailed Summary Page		X 11a 11b 11c 12			
				13 14 15 16 17			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MS JANE HULSE			Date of Receipt			
	Mailing Address 95 GORDON RD			05 27 Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: INC:A:24120			
	ESSEX FELLS	NJ	07021	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		550.00	1			
	Other (specify)	0 0	330.00]			
— В.	Full Name (Last, First, Middle Initial) MR DAVID ISRAEL			Date of Receipt			
	Mailing Address 730 COLUMBUS AVEN	UE		M M / D D / Y Y Y Y			
	City	Ctoto	7in Cada	05 27 2006			
	City NEW YORK	State NY	Zip Code	Transaction ID: INC:A:23886			
		INT	10025	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS DEVELOPMENT				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify)	1	275.00	1			
		0 0					
C.	Full Name (Last, First, Middle Initial) MS SUSAN ITO			Date of Receipt			
	Mailing Address 6366 SW 90TH STREE	Т		05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: INC:A:23892			
	GAINESVILLE	FL	32608	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	FEC ID number of contributing					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		550.00	11			
	Other (specify)		330.00	1			
6	UBTOTAL of Receipts This Page (optional)			125.00			
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 195 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR TODD JEFFREY Mailing Address 15 ELIZABETH STREET City DUMONT FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MISS ANNE JOHNSTON	State NJ C Occupation VP PHAF	Zip Code 07628 n RM CONTRACT & CONSUL e Year-to-Date ▼ 275.00	Date of Receipt M M M
J .	Mailing Address 256 MADISON AVE City RIVER EDGE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		Zip Code 07661 n FINANCE e Year-to-Date ▼	Transaction ID: INC:A:24176 Amount of Each Receipt this Period 30.00
- . .	Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTON TI City HENDERSON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NV C Occupation VP/GM	Zip Code 89052 n e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional))	70.08
т	OTAL This Period (last page this line number or	ılv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 195 (check only one) X 11a 11b 11c 12 15 16 17					
Ar or	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.					
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)					
3.	MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MS BECKY KAUS	State MN C C C C C C C C C C C C C	Zip Code 55372 n ENT & MKT PROG STRAT e Year-to-Date ▼ 275.00	Date of Receipt M M					
	MEDCO HEALTH SOLUTIONS		Zip Code 53051 n NICAL SVCS e Year-to-Date ▼ 275.00	Transaction ID: INC:A:24003 Amount of Each Receipt this Period 25.00					
D.	MEDCO HEALTH SOLUTIONS	State NJ C C C C C C C C C C C C C C C C C C	Zip Code 07456 n CAL SPECIALIST e Year-to-Date ▼ 275.00	Date of Receipt M M Z 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
s	UBTOTAL of Receipts This Page (optional)								
т	OTAL This Period (last page this line number only)	>						

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 195 (check only one) X
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
\setminus	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) A. MR WILLIAM KELLEY, III Mailing Address 1970 WOODLANDS PL				Date of Receipt 0 5 2 7 2 0 0 6
	City POWELL	State OH	Zip Code 43065	Transaction ID: INC:A:24056 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
В.	Full Name (Last, First, Middle Initial) MR KEVIN KELLY			Date of Receipt
	Mailing Address 251 POPLAR AVE	05 27 2006		
	City	State	Zip Code	Transaction ID: INC:A:23910
	HACKENSACK FEC ID number of contributing federal political committee.	C	07601	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n CLIENT SVC DELIVERY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
<u> </u>	Full Name (Last, First, Middle Initial) MS LISA KETNER			Date of Receipt
	Mailing Address 7 POINT VIEW			05 27 2006
	City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC:A:24040 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTI	n NG & PRODUCT DEV	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		550.00	
s	UBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 195 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Rep or for commercial purposes, other than	orts and Statements may n using the name and add	□ y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTION	IS INC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
City CHESTER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial KENNETH KLEPPER	ARRIN KLEINEGGER Ing Address 121 CONKLING TOWN ROAD State Zip Code ESTER NY 10918 ID number of contributing ral political committee. e of Employer OCO HEALTH SOLUTIONS Sipt For: Primary General Other (specify) ▼ Occupation DIR ACCT MGMT OPS Aggregate Year-to-Date ▼ 550.00		Date of Receipt M M / D D / 27 / 2006 Transaction ID: INC:A:24168 Amount of Each Receipt this Period 50.00 Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FRANKLIN LAKES FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		n CHIEF OPERATING OFFICE Year-to-Date ▼ 2115.30	Amount of Each Receipt this Period 192.30
Full Name (Last, First, Middle Initial MR JON KLINE Mailing Address 36 CORTLAN City MAHWAH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupatio VP OPS	Zip Code 07430 n PLANNING e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		292.84
TOTAL This Period (last page this lin	ne number only)		

SCHEDULE A (FEC Form 3X)

PAGE 132 / 195 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** <u>|</u>17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) MR BRADFORD KOGEN Date of Receipt Mailing Address 555 FORBUSH STREET 05 2006 27 City Zip Code State Transaction ID: INC:A:24160 **BOONTON** 07005 NJ Amount of Each Receipt this Period FEC ID number of contributing 20.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR CLIENT RETAIL Aggregate Year-to-Date ▼ Receipt For: Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. MS KATHLEEN KORDUCKI Date of Receipt Mailing Address 920 CLARK STREET 0 5 27 2006 City Zip Code State Transaction ID: INC:A:23928 **BOWLING GREEN** OH 43402 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC Receipt For: Aggregate Year-to-Date ▼ Primary General 215.00 Other (specify) Full Name (Last, First, Middle Initial) C. MR RODGER KORMYLO Date of Receipt Mailing Address 1310 43RD AVE 05 27 2006 Citv State Zip Code Transaction ID: INC:A:24010 **KENOSHA** WI 53144 Amount of Each Receipt this Period FEC ID number of contributing 25.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation NATL ACCT EXEC Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 195 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat- for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY Mailing Address 143 DEERFIELD TERRA City MAHWAH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State NJ C C Occupation SR DIR E	Zip Code 07430 n BUS PLANNING & ADMIN e Year-to-Date ▼	Date of Receipt M M M / 27 / 2006 Transaction ID: INC:A:23947 Amount of Each Receipt this Period 25.00
3.	MS BARBARA KRZAK Mailing Address 495 ISLAND WAY City FRANKLIN LAKES FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		Zip Code 07417 OM STRATEGY & DELIVERY OF Year-to-Date ▼ 440.00	Date of Receipt M M M / 27 / 2006 Transaction ID: INC:A:24093 Amount of Each Receipt this Period 40.00
D.	Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN Mailing Address 2735 YORK RD City COLUMBUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 43221 n AL VP PHARMACIES Year-to-Date ▼	Date of Receipt M M M / D Z 7 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S	UBTOTAL of Receipts This Page (optional)			115.00
т	OTAL This Period (last page this line number on	lv))	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 195 (check only one) X 11a 11b 11c 12
			, ,	13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER			Date of Receipt
	Mailing Address 7017 COBALT WAY			05 27 2006
	City CITRUS HEIGHTS	State CA	Zip Code 95621	Transaction ID: INC:A:24042
	FEC ID number of contributing federal political committee.	C	93021	Amount of Each Receipt this Period 100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR STA	n TE GOVERNMENT AFFAIR:	<u> </u>
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR ROBERT LONG				Date of Receipt
	Mailing Address 18 HARLIND TERRACE	05 27 2006		
	City	State	Zip Code	Transaction ID: INC:A:24033
	RAMSEY FEC ID number of contributing federal political committee.	NJ C	07446	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	CCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
- C.	Full Name (Last, First, Middle Initial) MS DEBRA LUDGATE			Date of Receipt
	Mailing Address 238 WOODLAND AVE			05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23997
	SUMMIT FEC ID number of contributing federal political committee.	C	07901	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n CREATIVE SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional))	150.00
Т	OTAL This Period (last page this line number on	v)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 135 / 195
	ZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 1 13 14	11c 12 15 16 17
Any inforr	mation copied from such Reports and Stat nmercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of solic	iting contributions
NAME	OF COMMITTEE (In Full)				
A. MSCH	ame (Last, First, Middle Initial) HERYL MACDONALD	NOE		Date of Receipt	
City	g Address 15011 EAGLEPARK PLA	State	Zip Code	0 5 2 7	
LITH	IA	FL	33547	Amount of Each Re	
	D number of contributing I political committee.	C			25.00
Name MED(of Employer CO HEALTH SOLUTIONS	Occupation SR DIR C	n OS REQUIREMENTS		
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00		
3. MR KE	ame (Last, First, Middle Initial) ENNETH MALLEY			Date of Receipt	
Mailing	g Address 764 W. SADDLE RIVER	05 / 27			
City	IO KIIC	State	Zip Code	Transaction ID: IN	
FEC II	O KUS D number of contributing I political committee.	NJ C	07423	Amount of Each Re	50.00
Name MED(of Employer CO HEALTH SOLUTIONS	Occupation VP PROI	TOUCT & CHANNEL MKTING		
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00		
	ame (Last, First, Middle Initial) CHAEL MANDAGLIO			Date of Receipt	
-	g Address 33 HICKORY TAVERN F	RD		M M / D D D 0 5 2 7	
City	FTTF	State	Zip Code	Transaction ID: IN	
	D number of contributing I political committee.	C	07933	Amount of Each Re	50.00
Name MED(of Employer CO HEALTH SOLUTIONS	Occupation VP FINAL			
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00		
SUBTO	FAL of Receipts This Page (optional)				125.00
TOTAL	This Period (last page this line number on	ly)	>		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 136 / 195 (check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CTION COMMITTEE (a.k.a	Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL			Date of Receipt
	Mailing Address W144 N7150 TERRACE	DRIVE		05 27 2006
	City MENOMONEE FALLS	State WI	Zip Code 53051	Transaction ID: INC:A:23999
	FEC ID number of contributing federal political committee.	C	33031	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
3.	Full Name (Last, First, Middle Initial) MR TODD MARTIN			Date of Receipt
	Mailing Address 11825 SHEPPARDS CRO	DSSING		05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City CLARKSVILLE	State MD	Zip Code	Transaction ID: INC:A:23966
	FEC ID number of contributing federal political committee.	C	21029	Amount of Each Receipt this Period 192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	
<u> </u>	Full Name (Last, First, Middle Initial) MR ROBERT MATCHETT			Date of Receipt
Mailing Address 27 LAKEVILLE RD				05 27 2006
	City SUSSEX	State NJ	Zip Code 07461	Transaction ID: INC:A:23937 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		HNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00	
S	UBTOTAL of Receipts This Page (optional)			242.30
	. 3 (1 /			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:
Δr	ny information copied from such Reports and Si	tatemente may	, ,	13 14 15 16 17
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JEFFREY MAY			Date of Receipt
	Mailing Address 137 WASHINGTON AV			05 27 2006
	City HILLSDALE	State NJ	Zip Code 07642	Transaction ID: INC:A:24137 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP DRUG	n G DISTRIB & CONTROL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2115.30	
В.	Full Name (Last, First, Middle Initial) MS PATRICIA MAZZONE Mailing Address 56 PENOBSCOT ST			Date of Receipt
		01-1-	7'- 0-1-	05 27 2006
	City CLIFTON	State NJ	Zip Code 07013	Transaction ID: INC:A:24038
	FEC ID number of contributing federal political committee.	C	0/013	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		PRODUCT SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
C.				Date of Receipt
	Mailing Address 0-45 27TH ST			05 27 2006
	City FAIR LAWN	State NJ	Zip Code 07410	Transaction ID: INC:A:24087 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)			242.30
Ţ	OTAL This Pariod (last nage this line number)	only)	ı	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 138 / 195		
	EMIZED RECEIPTS	Use separate schedule(s) or each category of the		(check only one)		
11	EIVIIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
			, -	13 14 15 16 17		
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any person	n for the purpose of soliciting contributions		
Oi	1 1 7	arrie ariu auc	iress or any political committee to	Solicit Contributions from Such Committee.		
	NAME OF COMMITTEE (In Full)	NITIOAL A	OTION COMMITTEE ()	Mariland Hardina DAO)		
/	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)		
<u>/</u>	Full Name (Last, First, Middle Initial)					
A.	MS COLLEEN MCINTOSH			Date of Receipt		
	Mailing Address 87 ROSELAWN RD			M M / D D / Y Y Y Y		
				05 27 2006		
	City	State	Zip Code	Transaction ID: INC:A:24041		
	HIGHLAND MILLS	NY	10930	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		116.00		
	federal political committee.	0				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	1		
	MEDCO HEALTH SOLUTIONS	COUNSE	EL .			
	Receipt For:	Aggregate	Year-to-Date V			
	Primary General		1070.00			
	Other (specify)		1276.00			
_	Full Name (Last, First, Middle Initial)					
В.	MR STEVEN MCNAMARA	14/41/		Date of Receipt		
	Mailing Address 112 GREEN TERRACE WAY			05 27 2006		
	City	State	Zip Code	Transaction ID: INC:A:24175		
	WEST MILFORD	NJ	07480	Amount of Each Receipt this Period		
			07 100	Amount of Each receipt this remod		
	FEC ID number of contributing federal political committee.	C		192.31		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
		1	SINESS OPS	_		
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General	' '	2115.41			
	Other (specify)					
_	Full Name (Last, First, Middle Initial)					
C.	DAVID MILLER			Date of Receipt		
	Mailing Address 7 CLOVER LANE			M M / D D / Y Y Y Y		
				05 27 2006		
	City	State	Zip Code	Transaction ID: INC:A:23898		
	RANDOLPH	NJ	07869	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		25.00		
	federal political committee.					
	Name of Employer	Occupation	 1	┪		
	Name of Employer MEDCO HEALTH SOLUTIONS		R RELATIONS			
	Receipt For:		Year-to-Date ▼	1		
	Primary General	-				
	Other (specify) ▼		275.00			
				222.24		
s	JBTOTAL of Receipts This Page (optional)		······	333.31		
\vdash			<u>_</u>			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 195 (check only one) X 11a 11b 11c 12 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO			
A.	Full Name (Last, First, Middle Initial) MRS KAREN MILLER Mailing Address 14 ANDERSON RD City WHARTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State NJ C Occupation SR DIR F Aggregate		Date of Receipt M M Z Z Z Z Z D G
3.	MR GIOVANNI MINARDI Mailing Address 12 LINCOLN ROAD City KINNELON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07405	Date of Receipt M M
5.	Full Name (Last, First, Middle Initial) MR BHUPESH MISTRY Mailing Address 106 HAMBURG ROAD City PARSIPPANY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07054 n CAL SPECIALIST e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional))	80.00
T	OTAL This Period (last page this line number on	lv))	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 140 / 195
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
An	y information copied from such Reports and Stater for commercial purposes, other than using the name	ments may	not be sold or used by any perso	n for the purpose of soliciting contributions
<u> </u>	NAME OF COMMITTEE (In Full)	ne and add	ress of any political committee to	Solicit Contributions from Sacri Committee.
\rangle	MEDCO HEALTH SOLUTIONS INC. POL	ITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY			Date of Receipt
	Mailing Address 86 WELLINGTON AVENU	JE		05 27 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23887
	SHORT HILLS	NJ	07078	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	MEDCO HEALTH SOLLITIONS I	Occupation	PUTY GENERAL COUNSEL	_
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
Full Name (Last, First, Middle Initial) 3. MR RICHARD MOUNTJOY				Date of Receipt
	Mailing Address 2 STONEBRIDGE RD	05 27 2006		
	City	State	Zip Code	Transaction ID: INC:A:24169
	<u>SPARTA</u>	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	MEDCO HEALTH SOLLITIONS	Occupation	1 . ACCT EXEC	
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		220.00	
) .	Full Name (Last, First, Middle Initial) MR KEVIN MURPHY, JR			Date of Receipt
	Mailing Address 105 COVENTRY LN			05 27 7 2006
	City	State	Zip Code	Transaction ID: INC:A:23926
	TRUMBULL	CT	06611	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		75.00
	MEDOO HE'NI TH COLLITIONS	Occupation GENERA		
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	725.00	
s	UBTOTAL of Receipts This Page (optional)		·····	145.00
T	OTAL This Period (last page this line number only	.)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)		GE 141 / 195
	EMIZED RECEIPTS		or each category of the	(check only one)	
			Detailed Summary Page	X 11a 11b 11c 15	12 16 17
An	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso		
or		me and add	ress of any political committee to	solicit contributions from such c	ommittee.
\setminus	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI			Madea Health PAC\	
/	WILDOO HEALTH SOLUTIONS INC. POI	LITIOAL A	NOTION COMMINITIEE (a.K.a.	MEDICO I ICAILII FAC)	
	Full Name (Last, First, Middle Initial)			Date of Bassist	
٦.	MS BECKY NAGLE Mailing Address 64 WALTER AVE			Date of Receipt	YYY
				05 27	2006
	City	State	Zip Code	Transaction ID: INC:A:2	
	HASBROUCK HEIGHTS	NJ	07604	Amount of Each Receipt th	
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	DEINICAL SVCS		
	Receipt For:	Aggregate	Year-to-Date ▼	1	
	Primary General Other (specify) ▼	' '	275.00		
	□ Otilei (specily) ₩				
3.	Full Name (Last, First, Middle Initial) MR ARTHUR NARDIN			Date of Receipt	
	Mailing Address 28 POWDERHORN DR	M M / D D / Y	YYYY		
	City	0.5 2.7	2006		
	KINNELON	State NJ	Zip Code 07405	Transaction ID: INC:A:2 Amount of Each Receipt the	
	FEC ID number of contributing			7ca.it of East Floodipt to	
	federal political committee.	C			192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	1	
			RMACEUTICAL CONTRAC	TING	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		2112.00		
			<u> </u>		
•	Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN			Date of Receipt	
٠.	Mailing Address 45 DAVIS ROAD			M M / D D / Y	YYY
			7.0.1	05 27	2006
	City SPARTA	State NJ	Zip Code	Transaction ID: INC:A:2	
			07871	Amount of Each Receipt th	
	FEC ID number of contributing federal political committee.	C			26.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		1	
			OM STRAT & DELIV	-	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		286.00		
s	UBTOTAL of Receipts This Page (optional)		·····		243.00
_	OTAL This David destroyer H. F.	- \			
- 10	OTAL This Period (last page this line number only	y)			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 142 / 195			
IT	EMIZED RECEIPTS		or each category of the	(check only one)			
•••	EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12			
			, ,	13 14 15 16 17			
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER			Date of Receipt			
	Mailing Address 6 PARK DR SOUTH			05 27 2006			
	City	State	Zip Code	Transaction ID: INC:A:24159			
	RYE	NY	10580	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS		M STRATEGY & DELIVERY	<u>, </u>			
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		550.00				
	Other (specify) ▼	0 0	330.00				
В.	Full Name (Last, First, Middle Initial) MR MELVIN OHL			Date of Receipt			
	Mailing Address 274 E FRANKLIN TPKE	05 27 2006					
	City	State	Zip Code	Transaction ID: INC:A:24112			
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period			
	FEC ID number of contributing			5000			
	federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation					
			CUREMENT & INVENTORY				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		550.00	1			
	Other (specify) ▼		330.00				
<u> </u>	Full Name (Last, First, Middle Initial) MS CLAUDINE OLSEN			Date of Receipt			
	Mailing Address 4 HIGHGATE CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: INC:A:24152			
	SUFFERN	NY	10901	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT				
	Receipt For:						
	Primary General	55 0	e Year-to-Date ▼	1			
	Other (specify) ▼		275.00				
٩	UBTOTAL of Receipts This Page (optional)			125.00			
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 11a 11b	PAGE 143 / 195
An	y information copied from such Reports and Staten for commercial purposes, other than using the nam	nents may	not be sold or used by any perso	n for the purpose of solicit	15 16 17
$\frac{o^{r}}{o^{r}}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI				such committee.
Α.	Name of Employer MEDCO HEALTH SOLUTIONS C T		Zip Code 07458 CAL SPECIALIST Year-to-Date ▼ 275.00	Date of Receipt M M / D D 2 7 Transaction ID: IN Amount of Each Re	2 0 0 6 IC:A:24020
3.	Full Name (Last, First, Middle Initial) MS ROSE OWEN Mailing Address 4108 MOUNTAIN ROAD City GLEN ALLEN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS		Zip Code 23060 TE GOVERNMENT AFFAIR: Year-to-Date ▼ 440.00	Date of Receipt M M M / D D D 2 7 Transaction ID: IN Amount of Each Re	
C .	Name of Employer MEDCO HEALTH SOLUTIONS C E		Zip Code 07456 07456 R TECHNOLOGY Year-to-Date ▼ 550.00	Date of Receipt M M M / D D D D D D D D D D D D D D D D	
s	UBTOTAL of Receipts This Page (optional)				115.00
T	OTAL This Period (last page this line number only)		>		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 144 / 195
· · · · · · · · · · · · · · · · · · ·			Use separate schedule(s) or each category of the	(check only one)	
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b	11c 12
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An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	y not be sold or used by any perso	on for the purpose of solicities	ng contributions
<u>. </u>	NAME OF COMMITTEE (In Full)	arro arra aac	aroos or arry pointed committee to	Conort Contributions in our co	don dominitoo.
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
_			· 	_	
۹.	Full Name (Last, First, Middle Initial) MS DAWN PAGANO			Date of Receipt	
	Mailing Address 185 PASCACK ROAD			M M / D D	
	01.	01-1-	7'- 0-4-	05 27	2006
	PARK RIDGE	State NJ	Zip Code 07656	Transaction ID: INC Amount of Each Rec	
	FEC ID number of contributing		07030	Amount of Each Nec	
	federal political committee.	C			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	n TECHNOLOGY		
	Receipt For:		e Year-to-Date ▼		
	Primary General		400.00	1	
	Other (specify) ▼	0 0	100.00		
3.	Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE			Date of Receipt	
•	Mailing Address 12 MILLBROOK COURT	M M / D D	/ Y Y Y Y		
		05 27	2006		
	City	State	Zip Code	Transaction ID: INC	
	LIVINGSTON	NJ	07039	Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR N	n MARKET STRATEGY		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	-	275.00	1	
	Other (specify) ▼		0 0 0 0 0 0	1	
Э.	Full Name (Last, First, Middle Initial) MR MICHAEL PETEROY			Date of Receipt	
	Mailing Address 18 MOUNTAIN VIEW CT	Γ		0 5 2 7	2006
	City	State	Zip Code	Transaction ID: INC	C:A:24082
	RIVERDALE	NJ	07457	Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	n DDUCT DEVELOPMENT		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	· · ·	275.00]	
	Other (specify) ▼		2,0.00	1	
s	UBTOTAL of Receipts This Page (optional)				100.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 145 / 195				
ITEMIZED RECEIPTS			or each category of the	(check only one)				
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17				
Δr	y information copied from such Reports and Sta	otomonte may	y not be sold or used by any perso					
or	for commercial purposes, other than using the r	ame and add	dress of any political committee to	solicit contributions from such committee.				
\setminus	NAME OF COMMITTEE (In Full)							
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)				
	Full Name (Lock First Affalls Latin)							
A.	Full Name (Last, First, Middle Initial) MR THOMAS PETTYES			Date of Receipt				
	Mailing Address 8522 UPLAND LN NOR	TH		M ' M / D ' D / Y ' Y ' Y ' Y				
				05 27 2006				
	City	State	Zip Code	Transaction ID: INC:A:23960				
	MAPLE GROVE	MN	55311	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		30.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation						
	Receipt For:		L MGR GROUP Year-to-Date ▼					
	Primary General	Aggregate	: Teal-10-Date V	1				
	Other (specify) ▼	1	330.00					
	Full Name (Last, First, Middle Initial)			Data of Bassist				
В.	MS JUDITH PLATKIN Mailing Address 29 BLACKWELL AVE			Date of Receipt				
	Walling Address 29 BLACKWELL AVE			05 27 2006				
	City	State	Zip Code	Transaction ID: INC:A:23895				
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period				
	FEC ID number of contributing	C		50.00				
	federal political committee.	<u> </u>						
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1					
		GENERA						
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼		550.00					
	care (operation) 🗸	-		,				
_	Full Name (Last, First, Middle Initial)							
C.	MS JANET PORAT			Date of Receipt				
	Mailing Address 5 CRABAPPLE CT			05 27 2006				
	City	State	Zip Code	Transaction ID: INC:A:23963				
	MONSEY	NY	10952	Amount of Each Receipt this Period				
	FEC ID number of contributing	С		25.00				
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS				25.55				
		Occupation	1					
	MEDCO HEALTH SOLUTIONS	DIR BUS	INESS REQUIREMENTS					
Receipt For: Primary General Other (specify)			Year-to-Date ▼					
			275.00					
	Cuter (specify)			1				
s	105.00							
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	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 146 / 195 (check only one)			
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Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persol ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)			
۹.	Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE			Date of Receipt			
	Mailing Address 875 ALEXANDRIA CT			05 27 2006			
	City	State	Zip Code	Transaction ID: INC:A:24026			
	RAMSEY FEC ID number of contributing federal political committee.	NJ C	07446	Amount of Each Receipt this Period 192.30			
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SVP HR Aggregate	Year-to-Date ▼ 2115.30				
3.	Full Name (Last, First, Middle Initial) MR ROBERT PRITCHET Mailing Address 135 HOLLYBERRY DRIV			Date of Receipt 0 5 2 7 2 0 0 6			
	HOPEWELL JUNCTION FEC ID number of contributing federal political committee.	State NY	Zip Code 12533	Transaction ID: INC:A:24129 Amount of Each Receipt this Period 25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		TRACT ADMINISTRATION Year-to-Date ▼ 275.00				
- C.	Full Name (Last, First, Middle Initial) MR MARK PROULX			Date of Receipt			
	Mailing Address 20 BRANDY RIDGE ROA	AD.		05 27 2006			
	City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC:A:24193 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.		C		100.00			
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		RMACY & CUST SVC OPS Year-to-Date ▼				
s	UBTOTAL of Receipts This Page (optional)			317.30			

90	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 147 / 195				
		Use separate schedule(s) or each category of the		(check only one)				
П	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12				
				13 14 15 16 17				
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and ado	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
\setminus	NAME OF COMMITTEE (In Full)							
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) MS THERESA RAFKIN			Date of Receipt				
	Mailing Address 50 GLORIA DRIVE			05 27 2006				
	City	State	Zip Code	Transaction ID: INC:A:24044				
	ALLENDALE	NJ	07401	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General		275.00	7				
	Other (specify) ▼	0 0	273.00	J				
— В.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt				
	Mailing Address 800 SANDY TRAIL			05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: INC:A:24211				
	KELLER	TX	76248	Amount of Each Receipt this Period				
	FEC ID number of contributing		. 02.10					
	federal political committee.	C		10.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1					
	Receipt For:	_	Year-to-Date ▼					
	Primary General	33 13		7				
	Other (specify) ▼		210.00					
<u> </u>	Full Name (Last, First, Middle Initial) MS FRANCES RAO			Date of Receipt				
	Mailing Address 146 JOHNSON RD			M M / D D / Y Y Y Y Y O O O O O				
	City	State	Zip Code	Transaction ID: INC:A:23911				
	SCARSDALE	NY	10583	Amount of Each Receipt this Period				
	•		10000					
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F						
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General		275.00	7				
	Other (specify) ▼		275.00	1				
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 195 (check only one) X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
A .	Full Name (Last, First, Middle Initial) MS JOANN REED Mailing Address 4 ANTLER CT City MATAWAN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)		Zip Code 07747 n ANCE & CHIEF FIN OFFCR e Year-to-Date ▼ 719.18	Date of Receipt M M M / D D 7 27 2006 Transaction ID: INC:A:24119 Amount of Each Receipt this Period 65.38
3.	MR DAVID REILLY Mailing Address 1170 FIFTH AVENUE APT # 15D City NEW YORK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	L	Zip Code 10029 BOR RELATIONS 2 Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS Mailing Address 412 RIVER MEWS LANI City EDGEWATER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation EXEC DI	Zip Code 07020 n R TECHNOLOGY e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)			175.38
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 195 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
An	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)		
۹.	Full Name (Last, First, Middle Initial) MR DAVID ROBARGE Mailing Address 4565 QUEENSLAND LN	N		Date of Receipt 0 5 27 2006		
	City	State	Zip Code	Transaction ID: INC:A:23936		
	MINNEAPOLIS FEC ID number of contributing federal political committee.	C	55446	Amount of Each Receipt this Period 25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		IICAL SVCS Year-to-Date ▼ 275.00			
3.	Full Name (Last, First, Middle Initial) MS SORAYA RODRIGUEZ-BALZAC Mailing Address 22 PAPOOSE TRAIL			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	y State Zip Code				
	ANDOVER	NJ	07821	Transaction ID: INC:A:24207 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PUB	ı LIC AFFAIRS			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00			
—).	Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO			Date of Receipt		
	Mailing Address 96 LEHMANN STREET			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:23977		
	MAHWAH	NJ	07430	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRESIDE	n ENT SYSTEMED			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00			
s	UBTOTAL of Receipts This Page (optional)			100.00		
т.	OTAL This Period (last page this line number on	v)				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 150 / 195
ΙT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may and add	not be sold or used by any persor ress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	MEDGO HEALTH SOLUTIONS INC. POLIT	TICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MS DONNA ROSEN			Date of Receipt
	Mailing Address 7 RED OAK LANE			05 27 7 2006
	,	State	Zip Code	Transaction ID: INC:A:24130
		NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	MEDCO HE'ALTH SOLLITIONS	ccupation P OPS-0	CLINICAL TECH	1
	Receipt For: A	ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
3.	Full Name (Last, First, Middle Initial) MR RICHARD RUBINO			Date of Receipt
	Mailing Address 3103 RIO VISTA DRIVE			05 27 2006
	•	State	Zip Code	Transaction ID: INC:A:24126
		NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	MEDCO HE'ALTH SOLLITIONS	ccupation VP & CC	ONTROLLER	
		ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		935.00	
 C.	Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK			Date of Receipt
	Mailing Address 21 SKY TOP RIDGE			05 27 YYYYY 2006
	,	State	Zip Code	Transaction ID: INC:A:23994
		NJ	07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	MEDCO HE'ALTH SOLLITIONS	ccupation P FORM	IULARY & COVERAGE MGI	− MT
		ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	550.00	
s	UBTOTAL of Receipts This Page (optional))	185.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 151 / 195					
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				13 14 15 16 17					
Ar	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	y not be sold or used by any perso	n for the purpose of soliciting contributions					
V	NAME OF COMMITTEE (In Full)	ame and add	aress or any political committee to	solicit contributions from such committee.					
	MEDCO HEALTH SOLUTIONS INC. PO	NITICAL A	ACTION COMMITTEE (a.k.a.	Madaa Haalth BAC\					
\angle	MEDGO REALTH SOLUTIONS INC. FO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco neatti FAC)					
A.	Full Name (Last, First, Middle Initial) MS MARY RYAN			Date of Receipt					
	Mailing Address 456 RICHMOND AVENU	JE		05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: INC:A:24118					
	MAPLEWOOD	NJ	07040	Amount of Each Receipt this Period					
	FFC ID number of contribution								
	FEC ID number of contributing federal political committee.	C		78.34					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP COR	n P REGULATORY AFFAIRS						
	Receipt For:		e Year-to-Date ▼	_					
	Primary General			1					
	Other (specify)		861.74						
				'					
В.	Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE			Date of Receipt					
	Mailing Address 7 AHERN WAY			M M / D D / Y Y Y Y					
	O.h	Ctata	7in Ondo	05 27 2006					
	City	State	Zip Code	Transaction ID: INC:A:24013					
	WEST ORANGE	NJ	07052	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		25.00					
	federal political committee.								
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation							
		l	rechnology						
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General		275.00						
	☐ Other (specify) ▼	0 0	270.00						
_	Full Name (Last, First, Middle Initial)								
C.				Date of Receipt					
	Mailing Address 339 GRAMERCY PL			05 27 2006					
	City	State	Zip Code	Transaction ID: INC:A:24125					
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period					
		C		50.00					
		Occupation	n						
			YTICAL SVCS						
		Aggregate	e Year-to-Date ▼	7					
			FEO.00	1					
	Other (specify)		550.00						
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S	CHEDULE A (FEC Form 3X)		Llog concrete achadula(a)	FOR LINE NUMBER: PAGE 152 / 195
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
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Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>	NAME OF COMMITTEE (In Full)			
)	MEDCO HEALTH SOLUTIONS INC. POI	ITICAL A	CTION COMMITTEE (a k a	Medco Health PAC)
/	WEBGG HENETH GGEG HONG ING. 1 GI		iorion committee (a.n.a.	i woodd ffoaiti f 7.0)
۹.	Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ			Date of Receipt
	Mailing Address 3556 DAVIS			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:23932
	EVANSTON	IL	60203	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		R CLINICAL SVCS Year-to-Date ▼	-
	Primary General	Aggregate	Teal-to-Date ▼	
	Other (specify) ▼		275.00	
				'
3.	Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT			Date of Receipt
	Mailing Address 7330 EVEREST LANE - N	NORTH		M M / D D / Y Y Y Y
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24162
	MAPLE GROVE	MN	55311	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.			
	MEDCO LEVITU SOLLITIONS	Occupation		
			CT EXEC	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	275.00	
	(4)		0 0 0 0 0 0 0	1
<u> </u>	Full Name (Last, First, Middle Initial) MR LEONARD SCOTT			Date of Receipt
	Mailing Address 2300 MCCUE ROAD - SU	JITE 212		M M / D D / Y Y Y Y
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24057
	HOUSTON	TX	77056	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer	Ossumation		
	MEDCO DEALTH COLLITIONS	Occupation	ACCT MGMT	
	Receipt For:		Year-to-Date ▼	-
	Primary General	33 -3		
	Other (specify) ▼	L	275.00	
		75.00		
S	UBTOTAL of Receipts This Page (optional)	<u></u>	<u> </u>	75.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 153 / 195			
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or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from	such committee.			
\setminus	NAME OF COMMITTEE (In Full)							
	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) MR ROBERT SENDEWICZ			Date of Receipt				
Α.	Mailing Address 1220 CROSSING WAY			M M / D D	/ Y Y Y Y			
	City	State	Zip Code	05 27	2006			
	WAYNE	NJ	07470	Transaction ID: IN Amount of Each Re				
	FEC ID number of contributing federal political committee.	C		7 till dank di Ederi He	25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	TECHNOLOGY					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼		275.00]				
В.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III			Date of Receipt				
	Mailing Address 266 BRUSHY CREEK A	VE		05 27	2006			
	City	State	Zip Code	Transaction ID: INC:A:24037				
	LAS VEGAS	NV	89148	Amount of Each Re	ceipt this Period			
	FEC ID number of contributing federal political committee.	C			28.85			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS						
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼	1 1	375.05					
<u> </u>	Full Name (Last, First, Middle Initial) MR JOHN SHEA			Date of Receipt				
•	Mailing Address 62 FRANKLIN TURNPIN	ΚΕ		M M / D D				
	Cit.	04-4-	7in Oada	05 27	2006			
City State ALLENDALE NJ			Zip Code 07401	Transaction ID: IN Amount of Each Re				
	FEC ID number of contributing		07101	Amount of Each fie	 			
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation ASST CO					40.00			
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼		440.00					
s	UBTOTAL of Receipts This Page (optional)				93.85			
T	OTAL This Period (last page this line number or	nly)						

PAGE 154 / 195 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) MR FRANK SHEEHY Date of Receipt Mailing Address 119 HAMILTON RD 05 2006 27 City State Zip Code Transaction ID: INC:A:23944 **RIDGEWOOD** 07450 NJ Amount of Each Receipt this Period FEC ID number of contributing 50.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation GENERAL MGR Aggregate Year-to-Date ▼ Receipt For: Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** MR PETER SHERMAN Date of Receipt Mailing Address 139 GATES AVENUE 0 5 27 2006 City State Zip Code Transaction ID: INC:A:23888 **MONTCLAIR** NJ 07042 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation MANAGING COUNSEL Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) C. MR ELWOOD SIDES III Date of Receipt Mailing Address 150 CLAREMONT AVE 05 2006 27 Transaction ID: INC:A:23948 Citv State Zip Code LONG BEACH CA 90803 Amount of Each Receipt this Period FEC ID number of contributing 25.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP SALES Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional)

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NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. POLI	ITICAL AC	CTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) A. JEFFREY SIMEK			Date of Receipt
Mailing Address 197 OXFORD RD			M M / D D / Y Y Y Y
City	State	Zip Code	0 5 2 7 2 0 0 6 Transaction ID: INC:A:24021
-	NY	10918	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
MEDOO HE'ALTH SOLLITIONS	Occupation VP PUBLIC	C AFFAIRS	1
	Aggregate Y	/ear-to-Date ▼	
Primary General Other (specify) ▼		2115.41	
Full Name (Last, First, Middle Initial) MR LEE SIMON			Date of Receipt
Mailing Address 2390 GREENVIEW ROAD)		05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC:A:24170
NORTHBROOK	IL .	60062	Amount of Each Receipt this Period
	С		50.00
MEDOO HE'AI TH SOLLITIONS	Occupation GENERAL	. MGR GROUP	
Receipt For:		/ear-to-Date ▼	
Primary General Other (specify) ▼		550.00	
	- 1 1		
Full Name (Last, First, Middle Initial) MR JEFFREY SINKO			Date of Receipt
Mailing Address 10 CHERRY TREE LANE			05 27 2006
City	State	Zip Code	Transaction ID: INC:A:24051
	NJ	07405	Amount of Each Receipt this Period
	С		25.00
MEDCO HEALTH SOLUTIONS C	Occupation COUNSEL		
Receipt For: Primary General	Aggregate Y	/ear-to-Date ▼	
Other (specify)		275.00	
SUBTOTAL of Receipts This Page (optional)		·····	267.31
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Primary General Other (specify) ▼ 330.00												
B. ANN SMITH Mailing Address 437 GLENDALE RD City State Zip Code NJ 07481 FEC ID number of contributing federal political committee. Name of Employer NJ 07446 FEC ID number of contributing federal political committee. C. Mare of Employer NJ 07446 FEC ID number of contributing federal political committee. Date of Receipt Transaction ID: INC:A:24012 Amount of Each Receipt this Period Z5.00 Date of Receipt Amount of Each Receipt this Period FULL Name (Last, First, Middle Initial) C. MR ROBERT SMITH Mailing Address 40 JOSHUA DR T City State Zip Code NJ 07446 FEC ID number of contributing federal political committee. NJ 07446 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00		Primary General	Aggregate									
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	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)	
			(aa.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Full Name (Last, First, Middle Initial)				
Α.	MR DAVID SNOW, JR			Date of Receipt	
	Mailing Address 23 CEDAR GATE ROA	ND.		05 27	
	City	State	Zip Code	Transaction ID: IN	
	DARIEN	CT	06820	Amount of Each Re	
	FEC ID number of contributing		1 1 1 1 1 1 1	7 tillount of Edon't to	
	federal political committee.	C			192.31
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	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
	Receipt For:		AN & CEO e Year-to-Date ▼	-	
	Primary General	Aggregate	r rear-to-Date ▼		
	Other (specify)		2115.41		
			0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)				
В.				Date of Receipt	
	Mailing Address 30 MICHELLE WAY			05 27	
	City	State	Zip Code		
	PINE BROOK	NJ	07058	Transaction ID: IN	
		INU	07036	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
		VP FINA		4	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)	' '	440.00		
	canon (opening) 🗸	0 0			
_	Full Name (Last, First, Middle Initial)				
C.	MR RALPH STAIANO			Date of Receipt	
	Mailing Address 32 ALDEN RD			05 27	2006
	City	State	Zip Code	Transaction ID: IN	
	MONROE	NY	10950	Amount of Each Re	
	FEC ID number of contributing		10000	Amount of Each Tic	· · · · · · ·
	federal political committee.	C			25.00
	·	1.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
			BUSINESS REQUIREMENTS		
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	Other (specify)		275.00		
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 158 / 195
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$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN			Date of Receipt
	Mailing Address 7 FOREST LAKE DR			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24128
	WEST HARRISON	NY	10604	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	· · ·	275.00	
	Other (specify) ▼			
3.	Full Name (Last, First, Middle Initial) MS JILL STEARNS			Date of Receipt
	Mailing Address 13130 HALSELL DR			M M / D D / Y Y Y Y
	21	. .		05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24172
	AUSTIN	TX	78732	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	·			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CT EXEC	
	Receipt For:		Year-to-Date ▼	-
	Primary General	/ tggi ogato		
	Other (specify) ▼		275.00	
Э.	Full Name (Last, First, Middle Initial) MR CRAIG STEEL			Date of Receipt
	Mailing Address 122 DEMAREST AVENU			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:23967
	EMERSON	NJ	07630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC	T MGMT	
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	Primary General	' '	275.00	
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	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DI ITICAL A	ACTION COMMITTEE (a k a	Medco Health PAC)
	Full Name (Last, First, Middle Initial)			
A.	MS SUSAN STEELE			Date of Receipt
	Mailing Address 501 CONTINENTAL DF	ĺ		05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24239
	SAGAMORE HILLS	ОН	44067	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer	Occupation	2	-
	Name of Employer MEDCO HEALTH SOLUTIONS		CT EXEC	
	Receipt For:		Year-to-Date ▼	-
	Primary General	33 -3		
	Other (specify) ▼		275.00	
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В.	Full Name (Last, First, Middle Initial) MS AMY STEINKELLNER			Date of Receipt
Ь.	Mailing Address 1740 HIGHLAND DRIV	<u> </u>		M M / D D / Y Y Y Y
	Walling Address 1740 Fild ILAND DITTY	_		05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24000
	ELM GROVE	WI	53122	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.			30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	7
	MEDCO HEALTH SOLUTIONS	VP CLIN	ICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	-	550.00	
	Other (specify)		330.00	
	Full Name (Last, First, Middle Initial)			
C.	DR GLEN STETTIN			Date of Receipt
	Mailing Address 8 MILL GLEN CT			M M / D D / Y Y Y Y
	City	Ctata	7in Codo	05 27 2006
	City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC:A:24189
			07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/GM	n CLIN & THERAP SOL GRO	
	Receipt For:		Year-to-Date V	
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	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
\angle				,
Α.	Full Name (Last, First, Middle Initial) MR SCOTT STRATTON			Data of Bassist
Α.	Mailing Address 351 TIMBERLANE DRIV	/ C		Date of Receipt
	Walling Address 551 HIMBERLAINE DRIV	′ ⊑		05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24228
	ORANGE	CT	06477	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		30.00
	Name of Employer	Occupation	า	-
	Name of Employer MEDCO HEALTH SOLUTIONS		DUCT DEVELOPMENT	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		EE0 00	
	Other (specify) ▼		550.00	
	5 HAL (1) 5 1 MOLE 1 20 D			
В.	Full Name (Last, First, Middle Initial) MS PATRICIA STRETE			Date of Receipt
	Mailing Address 19275 PAVER BARNES	ROAD		M M / D D / Y Y Y Y
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:23931
	MARYSVILLE	OH	43040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	rederal political confinitiee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			IICAL THERAPEUTICS	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		275.00	
		-	0 0 0 0 0 0 0	'
	Full Name (Last, First, Middle Initial)			
C.	MS COLEEN SULLIVAN	_		Date of Receipt
	Mailing Address 38 BARKMILL TERRAC	E		05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24171
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	า	7
	MEDCO HEALTH SOLUTIONS		PRODUCT DEVELOPMENT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		275.00	
	Other (specify) ▼		210.00	
٩	JBTOTAL of Receipts This Page (optional)			100.00
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 195 (check only one) X 11a 11b 11c 12
Ar	y information copied from such Reports and Stat	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
$\frac{\text{or}}{}$	for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO			
A .	Full Name (Last, First, Middle Initial) MS CYNTHIA SULLIVAN Mailing Address 21 DENISE DRIVE City KINNELON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07405	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Full Name (Last, First, Middle Initial) MR MARK SULLIVAN Mailing Address 821 SUMMIT CT City MANAKIN SABOT FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General		Zip Code 23103	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	Other (specify) Full Name (Last, First, Middle Initial) MS IRENE SUTTON Mailing Address 374 KINGSTON CT City WEST NEW YORK FEC ID number of contributing federal political committee.	State NJ	Zip Code 07093	Date of Receipt M M
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		TECHNOLOGY Year-to-Date ▼ 275.00	
s	UBTOTAL of Receipts This Page (optional)		······	100.00
Т	OTAL This Period (last page this line number on	lv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 195 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt
	Mailing Address 8362 GOLDEN PRAIRIE	E DRIVE		05 27 2006
	City TAMPA	State FL	Zip Code 33647	Transaction ID: INC:A:23975 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 485.00	
_	Full Name (Last, First, Middle Initial) MS MARY THORSBY			Date of Receipt
Ь.	Mailing Address 17326 ELLEN DR			M M / D D / Y Y Y Y Y O S 2 7 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:23991
	LIVONIA	MI	48152	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR S	n SPECIAL MARKETS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 700.00	
C.	Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN Mailing Address 838 COLONIAL RD			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23906
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENE	n EFIT SYSTEMS SUPPORT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	IIRTOTAL of Receipts This Page (optional)			175.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 163 / 195 (check only one) X 11a 11b 11c 12
-			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO			
۸.	Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER			Date of Receipt
	Mailing Address 713 INDIAN CREEK RD			05 27 7 2006
	City AMHERST	State VA	Zip Code 24521	Transaction ID: INC:A:24049 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	27021	75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR STA	n TE GOVERNMENT AFFAIR:	3
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 825.00	
3.	Full Name (Last, First, Middle Initial) MR GARY TULLY			Date of Receipt
	Mailing Address 16 FIELDHEDGE DRIVE	05 27 2006		
	City	State	Zip Code	Transaction ID: INC:A:24177
	HILLSBOROUGH	NJ	08844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT SVC DELIVERY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
	Full Name (Last, First, Middle Initial)			
Э.	MS CARA VAN ZILE			Date of Receipt
	Mailing Address 31 LINCOLN RD			05 27 2006
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC:A:23986
	FEC ID number of contributing federal political committee.	C	07403	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANA	n LYTICAL SVCS	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 225.00	
s	UBTOTAL of Receipts This Page (optional))	125.00
T	OTAL This Period (last page this line number on	v)		

S	CHEDULE A (FEC Form 3X)		lles esperate eshedule(e)	FOR LINE NUMBER: PAGE 164 / 195
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
<u>~</u>	NAME OF COMMITTEE (In Full)	Solidit Contributions from Such Committee.		
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	ΙΙΤΙΟΔΙ Δ	ACTION COMMITTEE (a k a	Medco Health PAC)
	WEDGO HEALTH GOLO HONO HO. I C	LITIONE	to Hort Golviivii i i LL (a.it.a	. Medee Health 1 7.0)
_	Full Name (Last, First, Middle Initial)			
A.	MRS MICHELLE VANCURA			Date of Receipt
	Mailing Address W328 S4230 SPRING RIDGE			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24240
	WAUKESHA	WI	53188	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		20.00
	Name of Employer	Occupation	<u> </u>	4
	Name of Employer MEDCO HEALTH SOLUTIONS	VP ACCT		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		050.00	
	Other (specify)	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS			Date of Receipt
	Mailing Address 105 ARRANDALE RD			M M / D D / Y Y Y Y
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24035
	ROCKVILLE CENTRE	NY	11570	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.	9		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		VP MKTI		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	550.00	
	case (eposity) V	0 0		1
_	Full Name (Last, First, Middle Initial)			
C.	MR GORDON VICKERS			Date of Receipt
	Mailing Address 436 MOUNTAIN AVENU	E		05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:23885
	WESTFIELD	NJ	07090	Amount of Each Receipt this Period
	FEC ID number of contributing	C		25.00
	federal political committee.	C		23.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDGO HEALTH SOLUTIONS		CT EXEC	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		275.00	
	Other (specify) ▼		27.0.00	
Г				
s	UBTOTAL of Receipts This Page (optional)			95.00
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COHEDINE A /EEC Form 2V)				FOR LINE NUMBER: PAGE 165 / 195
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		(check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
۸۰	y information copied from such Reports and Sta	stomonto mos	, not be cold or used by any perso	
or	for commercial purposes, other than using the n	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR DONALD VIDIC			Date of Receipt
	Mailing Address 611 REDWOOD CT			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24043
	CRANBERRY TOWNSHIP	PA	16066	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	PHARM OPS	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General			1
	Other (specify) ▼	1	220.00	
				'
В.	Full Name (Last, First, Middle Initial) MR MUNISH VIJ			Date of Receipt
	Mailing Address 2108 HENRY COURT			M M / D D / Y Y Y Y
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24215
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing			05.00
	federal political committee.	C		25.00
		10 "		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	·		CAL SPECIALIST	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	275.00	
	Ctrief (Specify)	1 1		
_	Full Name (Last, First, Middle Initial)			Date of Descript
U.	MR DANIEL WALDEN			Date of Receipt
	Mailing Address 450 BEECHMONT DR			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24102
	NEW ROCHELLE	NY	10804	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of European	10		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP REC	า GULATORY & MC PROGRA	MS
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		2115.41	
	Other (specify) ▼		2110.41	
				222 21
s	UBTOTAL of Receipts This Page (optional)			237.31
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PAGE 166 / 195 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** <u>|</u>17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE Date of Receipt Mailing Address 5445 GOODWIN AVENUE 05 2006 27 City State Zip Code Transaction ID: INC:A:24217 **DALLAS** TX 75206 Amount of Each Receipt this Period FEC ID number of contributing 192.31 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP SALES SEGMENT LEADER Aggregate Year-to-Date ▼ Receipt For: Primary General 2115.41 Other (specify) Full Name (Last, First, Middle Initial) **B.** MR CALVIN WASDYKE Date of Receipt Mailing Address 5 APPLE ORCHARD RD 0 5 27 2006 City Zip Code State Transaction ID: INC:A:24053 **MOORESTOWN** NJ 08057 Amount of Each Receipt this Period FEC ID number of contributing C 12.50 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM Receipt For: Aggregate Year-to-Date V Primary General 262.50 Other (specify) Full Name (Last, First, Middle Initial) C. MS CATHERINE WASSON Date of Receipt Mailing Address 26072 HARBOR VIEW 05 2006 27 Transaction ID: INC:A:23908 Citv State Zip Code **CAPISTRANO BEACH** CA 92624 Amount of Each Receipt this Period FEC ID number of contributing 50.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP NATL ACCTS Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 254.81 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 167 / 195
•		Use separate schedule(s) or each category of the		(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and ado	not be sold or used by any persol ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MRS KELLY WEBBER			Date of Receipt
	Mailing Address 9 LOCUST ST			05 27 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24030
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORF		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		550.00	
	Other (specify)	1 1]
— В.	Full Name (Last, First, Middle Initial) MR MARK WEGRYN			Date of Receipt
	Mailing Address 867 STANDISH AVE			M M / D D / Y Y Y Y
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24011
	MOUNTAINSIDE	NJ	07092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		1	RNAL BUSINESS DEV	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		275.00	
	Office (Specify)			1
<u> </u>	Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH			Date of Receipt
	Mailing Address 309 WATERVIEW DR			M M / D D / Y Y Y Y
	City	Ctoto	Zin Codo	05 27 2006
	City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC:A:23955
		INU	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES, C	n EO ACCREDO	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		2115.41	1
	Other (specify)		2110.71	
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_ ا	LIDTOTAL ACROSS THE POST OF TH			267.31
L	UBTOTAL of Receipts This Page (optional)		······	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 168 / 195 (check only one)
IT	EMIZED RECEIPTS	or each category of the	, ,	
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Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR KENNETH WERMES			Date of Receipt
	Mailing Address 26037 N WRANGLER RD			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24024
	SCOTTSDALE	AZ	85255	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		205.00	
	Other (specify) ▼		825.00	
В.	Full Name (Last, First, Middle Initial) MR PETER WHITE			Date of Receipt
	Mailing Address 2241 E. PINCHOT AVE. #17F			05 / 27 / 2006
	City	State	Zip Code	Transaction ID: INC:A:23900
	PHOENIX	AZ	85016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			
	Other (specify) ▼	0 0	220.00	
<u> </u>	Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON			Date of Receipt
	Mailing Address 1 RIVER COURT APARTMENT 2809			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24008
	JERSEY CITY	NJ	07310	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CONS	SULT SUPPORT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	-		1
	Other (specify) ▼		550.00	
[UBTOTAL of Receipts This Page (optional)			145.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 169 / 195
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			, 0	13 14 15 16 17
Ar	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS BEVERLY WINKLER			Date of Receipt
	Mailing Address 17 LYNWOOD RD			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24124
	VERONA	NJ	07044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n DRG DEV	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	275.00	
В.	Full Name (Last, First, Middle Initial) MS MARILYN WOLLETT			Date of Receipt
	Mailing Address 8174 MT AIR PL			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24061
	COLUMBUS	ОН	43235	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			RM PRACTICE	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		525.00	
	Other (specify) ▼	0 0	323.00	
C.	Full Name (Last, First, Middle Initial) MS ANNA WONG			Date of Receipt
	Mailing Address 64-20 BELL BLVD			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24213
	BAYSIDE	NY	11364	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
			n RED SOLUTIONS	
			Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		550.00	
	LIDTOTAL «CD» 11 TH D			100.00
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COUEDINE A /EEC Form 2V)				FOR LINE NUMBER: PAGE 170 / 195
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		(check only one)
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			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Δr	y information copied from such Reports and Sta	ntomonte mou	, not be sold or used by any perso	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS JUDITH WOOD			Date of Receipt
	Mailing Address 76 COLONIAL ROAD			05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24164
	STILLWATER	NY	12170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			ACCT MGMT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		275.00	1
	Other (specify)	0 0	270.00	1
В.	Full Name (Last, First, Middle Initial) MR JORDAN WOUK			Date of Receipt
	Mailing Address 554 CUMBERLAND AV	M M / D D / Y Y Y Y		
				05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24184
	TEANECK	NJ	07666	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		275.00	
— С.	Full Name (Last, First, Middle Initial) MR SERGEY YANITSKIY			Date of Receipt
	Mailing Address 793 LINCOLN AVE			M M / D D / Y Y Y Y Y O O O O O
	City	State	Zip Code	Transaction ID: INC:A:23942
	POMPTON LAKES	NJ	07442	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CAL SPECIALIST	
	Receipt For:		e Year-to-Date ▼	
	Primary General	55 -5 //-		1
	Other (specify) ▼	L	275.00	
s	UBTOTAL of Receipts This Page (optional)			75.00
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 171 / 195	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
••	LIMIZED REGEN 13		Detailed Summary Page	X 11a 11b	11c 12
Δ.	winformation conicd from auch Departs and Cta	tomonto mo	v pot be cold or up od by ony porcer	13 14	15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	rnot be sold or used by any persor dress of any political committee to s	solicit contributions from s	uch committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)	
\angle			,		
	Full Name (Last, First, Middle Initial)				
Α.	MS SARAH YINGLING			Date of Receipt	
	Mailing Address 901 ST MARKS AVE			05 27	2006
	City	State	Zip Code	Transaction ID: INC	
	WESTFIELD	NJ	07090	Amount of Each Rec	
	FEC ID number of contributing			7 111100111 01 24011 1100	· · · · · ·
	federal political committee.	C			25.00
	Name of European	10			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	DDUCT MGMT		
	Receipt For:		Year-to-Date ▼	-	
	Primary General	, iggi ogaic			
	Other (specify)	l	275.00		
_	Full Name (Last, First, Middle Initial)				
В.	MR DANIEL ZELEM, JR			Date of Receipt	
	Mailing Address 219 SPOOK ROCK RD.			05 27	2006
	City	State	Zip Code	Transaction ID: INC	
	SUFFERN	NY	10901	Amount of Each Rec	
	FEC ID number of contributing			7 Milount of Edon Floo	
	federal political committee.	C			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-CO			
	Receipt For:		Year-to-Date ▼	-	
	Primary General	riggrogate	Total to Buto ¥		
	Other (specify)		550.00		
_	Full Name (Last, First, Middle Initial)			.	
C.	MS JILL ZELMAN			Date of Receipt	
	Mailing Address 43604 EMERALD DUNE	S PL		05 27	2006
	City	State	Zip Code	Transaction ID: INC	
	LEESBURG	VA	20176	Amount of Each Rec	
	FEC ID number of contributing			1 1 1 1 1	
	federal political committee.	C			25.00
	Name of Employer	Occupation	2	-	
	Name of Employer MEDCO HEALTH SOLUTIONS		' ISOLIDATION PLAN & RPR1	-	
	Receipt For:	1	Year-to-Date ▼	-	
	Primary General	1 999			
	Other (specify) ▼		217.28		
_					
					100.00
s	UBTOTAL of Receipts This Page (optional)		·····		100.00
Г					
T	OTAL This Period (last page this line number or	nly)	>		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 172 / 195 (check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the nar	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	MEDCO HEALTH SOLUTIONS INC. POL	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR ANTHONY ZOLFO			Date of Receipt
	Mailing Address 726 HIGH MOUNTAIN RC	DAD		05 27 2006
	City	State	Zip Code	Transaction ID: INC:A:24220
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	MEDCO HEALTH SOLUTIONS	Occupation ASST CC	DUNSEL	
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
3.	Full Name (Last, First, Middle Initial) JOSIE HOECK			Date of Receipt
	Mailing Address 442 RITGER CIRCLE			05 / 31 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:23818
	ALLETON	WI	53002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
		Occupation DIRECTO	n DR, BUSINESS SUPPORT	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		300.00	
-).	Full Name (Last, First, Middle Initial) SHERYL STEINBERG MACHLOWITZ			Date of Receipt
	Mailing Address 816 NANCY WAY			05 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City WESTFIELD	State NJ	Zip Code 07090	Transaction ID: INC:A:24241
	FEC ID number of contributing federal political committee.	C	07090	Amount of Each Receipt this Period 1000.00
	' '	Occupation HOMEM		
		Aggregate	Year-to-Date ▼	1
	Primary General Other (specify) ▼		1000.00	
s	UBTOTAL of Receipts This Page (optional)		_	1325.00
			<u>_</u>	

50147.66

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 173 / 195 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c Detailed Summary Page 13 14 **X** 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) A. BANK OF MARIN Date of Receipt Mailing Address 50 MADERA BLVD. 0 5 31 2006 City Zip Code State Transaction ID: INC:A:23856 **CORTE MADERA** CA 94925 Amount of Each Receipt this Period FEC ID number of contributing C 97.60 federal political committee. INTEREST EARNED Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 398.71 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	97.60
TOTAL This Period (last page this line number only)	•	97.60

SCILDOLL B (I LOI OIIII 3X)	Use seperate schedule(s)		OR LINE heck on	: NUMBE lv one)	H:	L	PAGE	1/4/	195
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X 23 28b	2	4 Bc	25 29	26 30
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name									3
NAME OF COMMITTEE (In Full)	and address of any political CO	J1111111	100 10 5	Union COITE	10110113		AT COITE	·······································	
MEDCO HEALTH SOLUTIONS INC. POLITIONS	FICAL ACTION COMMITT	EE (a.k.a.	Medco H	lealth P	PAC)			
Full Name (Last, First, Middle Initial)					action II		B:230	21	
ALLYSON SCHWARTZ FOR CONGRESS				Date of 0 5	of Disbur		Y	′ _ Y _	Υ
Mailing Address P.O. BOX 45706				0.5		03	2	0 0 6	
	State Zip Code PA 19149			Amou	nt of Eac	ch Disbu	rsemer	nt this P	eriod
Purpose of Disbursement			-	<u> </u>				1000.0	00
Candidate Name		01 Categ							
ALLYSON SCHWARTZ		Тур							
Office Sought: X House Disburse	ment For: 2006 Primary X General								
President	Other (specify)								
State: PA District: 13									
Full Name (Last, First, Middle Initial) FRIENDS OF CLAY SHAW					action II		:B:230	17	
					M / D		Y	0 0 6	Y
Mailing Address P.O. BOX 2188				0.5		00		. 0 0 0	
•	State Zip Code FL 33303			Amou	nt of Eac	ch Disbu	rsemer	nt this P	eriod
Purpose of Disbursement			-					1000.0	00
Candidate Name		01 Categ							
CLAY SHAW JR .		Тур							
Office Sought: X House Disburser Senate X	ment For: 2006 Primary General								
President	Other (specify) ▼								
State: FL District: 22 Full Name (Last, First, Middle Initial)									
PROSPERITY HELPS INSPIRE LIBERTY	PAC				action II of Disbur		:B:230	20	
Mailing Address P.O. BOX 26366				0 ^M 5	M / D	0 3	Y	0 ŏ 6	Y
•	State Zip Code VA 22314			Amou	nt of Eac	ch Disbu	rsemer	nt this P	eriod
Purpose of Disbursement OTHER	I	01	1	L.				1000.0	00
Candidate Name GENERAL PURPOSE COMMITTEE		Cateo	gory/						
Office Sought: House Disburse				1					
Senate President	Primary General Other (specify) ▼								
State: District:	- (- ₁								
SUBTOTAL of Disbursements This Page (optional)			<u> </u>				3	0.00	0
TOTAL This Period (last page this line number only)			•						

SCILEBOLL B (I LOI OIIII 3X)	Use seperate schedule(s)	(check o	IE NUMBEF nlv one)	{ :	PAG	iE 1/5/	195
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	X 23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statemers or for commercial purposes, other than using the name							5
NAME OF COMMITTEE (In Full)	and address of any political co	ininitiee to s	SOIICIL COLILIII	Julions moi	III SUCII CO	mmuee	
MEDCO HEALTH SOLUTIONS INC. POLIT	TICAL ACTION COMMITT	EE (a.k.a.	Medco H	ealth PAC	C)		
Full Name (Last, First, Middle Initial)					EXP:B:23	3018	
STEVE ROTHMAN FOR NEW JERSEY IN	J.			Disburser		YY	Υ
Mailing Address PO BOX 714			05	/ DO	3	ž 0 Ď 6	
•	tate Zip Code NJ 07602		Amoun	t of Each I	Disbursem	ent this F	eriod
Purpose of Disbursement						1000.0	00
Ossalidata Nassa		011					
Candidate Name STEVEN ROTHMAN		Category/ Type					
Office Sought: X House Disburser							
	Primary General Other (specify) ▼						
State: NJ District: 09							
Full Name (Last, First, Middle Initial) J.D. HAYWORTH FOR CONGRESS					EXP:B:23	3027	
			M N	Disburser	D / Y	YYY	Υ
Mailing Address 14300 N. NORTHSIGHT	BLVD., #105		0.5	0	9	ž 0 Ď 6	
•	tate Zip Code AZ 85260		Amour	t of Each [Disbursem	ent this F	eriod
Purpose of Disbursement		• • •				1000.0	00
Candidata Nama		011					
Candidate Name J.D. HAYWORTH		Category/ Type					
Office Sought: X House Disburser							
Senate X President	Primary General Other (specify) ▼						
State: AZ District: 5							
Full Name (Last, First, Middle Initial) JOHNSON FOR CONGRESS COMMITTEE	:			ction ID: I	EXP:B:23	3026	
	-		M M			ž 0 ŏ 6	Υ
Mailing Address P.O. BOX 1986			0.5				
	tate Zip Code CT 06050		Amour	t of Each I	Disbursem	ent this F	eriod
Purpose of Disbursement		0.1.1	- L.			2000.0	00
Candidate Name		011 Category/					
NANCY L. JOHNSON		Type					
Office Sought: X House Disburser Senate X	nent For: 2006 Primary General						
	Other (specify)						
State: CT District: 05	·						
SUBTOTAL of Disbursements This Page (optional)		>				4000.0	0
TOTAL This Period (last page this line number only).		▶					

	CHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s)	١ .	FOR LINI		R:	PA	AGE	176 /	195
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check on 21b 27	22 28a	X 23 28b	24 28c		25 29	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name									
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMI	TTE	E (a.k.a.	Medco H	lealth PA	C)			
۹.	Full Name (Last, First, Middle Initial) JON KYL FOR U.S. SENATE Mailing Address P.O. BOX 10246				Date	action ID: of Disburse			8 0 0 6	Y
	PHOENIX	State Zip Code AZ 85064	<u> </u>		Amou	nt of Each	Disburse			-
	Purpose of Disbursement Candidate Name			011 tegory/	L.			10	500.0	U
	· → -	ment For: 2006 Primary General Other (specify)		- уре	_					
3.	Full Name (Last, First, Middle Initial) MCCRERY FOR CONGRESS				Date	action ID: of Disburse	ement			V
	Mailing Address 333 TEXAS ST., STE. 19				0 5	1	5 /	Ź	o ŏ 6	<u> </u>
	•	State Zip Code LA 71135			Amou	nt of Each	Disburse			-
	Purpose of Disbursement Candidate Name JIM MCCRERY		Ca	011 tegory/	L.			. 50	0.00	0
	Office Sought: X House Disburse	ment For: 2006 Primary General Other (specify)		урс	-					
Э.	Full Name (Last, First, Middle Initial) DON PAYNE FOR CONGRESS				Date	action ID: of Disburse	ement			_
	Mailing Address POST OFFICE BOX 288	4			0 ^M 5	M / D	9 /	ž	ó 6	Y
	•	State Zip Code DC 20013			Amou	nt of Each	Disburse	-		-
	Purpose of Disbursement			011				10	0.00	0
	Candidate Name DONALD PAYNE			tegory/ ype						
	Office Sought: X House Disburse Senate President State: NJ District: 10	ment For: 2006 Primary X General Other (specify)								
s	UBTOTAL of Disbursements This Page (optional) .			▶				75	00.00	0
T	OTAL This Period (last page this line number only)			•						

	SHEDOLE B (I LOT OHII 5X)	Use seperate schedule(s)		FOR LI		UMBEF ne)	₹:		PAGE	= 1///	195	
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name										3	
\ \	NAME OF COMMITTEE (In Full)	and address of any pointear	COITII	milioo io	30110	it Contin	Julions	110111 3	ucii coii	iiiiiiiiiiii		
	MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMIT	TTEE	E (a.k.a	a. Me	edco He	ealth P	AC)				
۸.	Full Name (Last, First, Middle Initial) FRIENDS OF MARK FOLEY						ction II		_	388		
-						oate of	f Disbur			Y Y	Υ	
	Mailing Address 1316 LAKE VICTORIA D	R.				0.5		19		ž 0 ŏ 6		
		State Zip Code FL 33461				Amoun	t of Eac	h Dist	ourseme	nt this F	eriod	_
	Purpose of Disbursement				1					1000.0	00	
	Candidate Name			011 tegory/	1							
	MARK FOLEY			уре								
	X	ment For: 2006 Primary General										
	President	Other (specify)										
	State: FL District: 16											
3.	Full Name (Last, First, Middle Initial) PASCRELL FOR CONGRESS						ction III		_	386		
	Mailing Address 17 VERNON COURT				_	0 5 M	1 / D	1 9	/ Y	ž 0 Ď 6	Υ	
						-						
	,	State Zip Code NJ 07424				Amoun	t of Eac	h Dist	ourseme	nt this F	eriod	_
	Purpose of Disbursement				1					1000.0	00	
	Candidate Name WILLIAM PASCRELL		Cat	011 tegory/	1							
		ment For: 2006	ı	уре								
	Senate X	Primary General										
	State: NJ District: 08	Other (specify)										
_	Full Name (Last, First, Middle Initial)						ction II			387		
<i>J</i> .	RYAN FOR CONGRESS					M M	f Disbur			YY	Υ	
	Mailing Address POST OFFICE BOX 1919					0 5		19		ž 0 ŏ 6		
	,	State Zip Code WI 53547				Amoun	t of Eac	h Dist	ourseme	nt this F	eriod	_
	Purpose of Disbursement			244	1					1000.0	00	
	Candidate Name PAUL D. RYAN		Cat	011 tegory/	1							
		ment For: 2006		уре	_							
	Senate X	Primary General										
	State: WI District: 01	Other (specify)										
•	UBTOTAL of Disbursements This Page (optional) .						•	•		3000.0	0	ī
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T	OTAL This Period (last page this line number only)				•							

SCHEDULE B (FECFOIII 3X)	Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 178 / 195
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL			
Full Name (Last, First, Middle Initial) A. COMMITTEE TO ELECT ARTUR DAVIS Mailing Address P.O. BOX 1845	TO CONGRESS		Transaction ID: EXP:B:23397 Date of Disbursement M 5 M
City BIRMINGHAM	State Zip Code AL 35201		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name ARTUR DAVIS		011 Category/ Type	1000.00
Office Sought: X House Disburs	ement For: 2006 Primary General Other (specify)	Турс	
Full Name (Last, First, Middle Initial) B. SCOTT GARRETT FOR CONGRESS			Transaction ID: EXP:B:23815 Date of Disbursement
Mailing Address P.O. BOX 905			05
City NEWTON Purpose of Disbursement	State Zip Code NJ 07860		Amount of Each Disbursement this Period
Candidate Name E. SCOTT GARRETT		011 Category/ Type	
Office Sought: X House Senate President State: NJ Disburs	ement For: 2006 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) C. TIBERI FOR CONGRESS			Transaction ID: EXP:B:23816 Date of Disbursement
Mailing Address 2021 E. DUBLIN GRAN	VILLE ROAD, SUI		05 7 2 0 0 6
City COLUMBUS	State Zip Code OH 43229		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name PATRICK JOSEPH TIBERI		Category/ Type	
Office Sought: X House Senate President State: OH District: 12	ement For: 2006 Primary X General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			3000.00
TOTAL This Period (last page this line number only			20500.00

SCIEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check				L P	AGE	1/9/	195
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	$\bigcap_{}^{} 2$	2 8a	23 28b	24 28c	\vdash	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)	e and address of any political co	Jillillittee to	Solicit	OHIHOU	ILIONS IT	JIII SUCII	COMMIN	illee	
MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	EE (a.k.a	ı. Med	co Hea	alth PA	C)			
Full Name (Last, First, Middle Initial) A. CITIZENS FOR CAREY					tion ID: Disburse	EXP:B	:2376	4	
				M M M D 5		0 /	Y Y	0 Ď 6	Y
Mailing Address 401 S. ARKANSAS AVE	NUE			J J	3		2 (700	
,	State Zip Code OH 45692		A	mount	of Each	Disburs	ement	this Pe	eriod
Purpose of Disbursement	Г		, L				. 5	500.0	0
Candidate Name		011 Category/							
NON-FEDERAL CONTRIBUTION		Type							
Office Sought: House Disburse Senate	ment For: 2006 Primary X General								
President State: OH District:	Other (specify)								
Full Name (Last, First, Middle Initial)			Т	ransac	tion ID:	EXP:B	:2376	 7	
3. CITIZENS FOR DEWINE				ate of [Disburse				
Mailing Address 506 CRISPWIND COUR	Т			0 5 M	[′] 3	o ′	Ž	o ŏ 6	Y
,	State Zip Code OH 45324		А	mount	of Each	Disburs	ement	this Pe	eriod
Purpose of Disbursement			, l				2	250.0	0
Candidate Name		011 Category/							
NON-FEDERAL CONTRIBUTION		Type							
Office Sought: House Disburse Senate	ment For: 2006 Primary X General								
President State: OH District:	Other (specify)								
Full Name (Last, First, Middle Initial)			T	ransac	tion ID:	EXP:B	:2377	7	
CITIZENS FOR GEOFFREY SMITH				мм	Disburse		ΥΥΥ	Υ	Y
Mailing Address 1479 CLIFF COURT #B			L	0 5	3	0 /	2 (o ŏ 6	
	State Zip Code OH 43204		A	mount	of Each	Disburs	ement	this Pe	eriod
Purpose of Disbursement	Г	0.1.1	T L				5	500.0	0
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type							
Senate	ment For: 2006 Primary X General								
President State: OH District:	Other (specify)								
SUBTOTAL of Disbursements This Page (optional)		<u> </u>					12	50.0	0
TOTAL This Period (last page this line number only)									
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SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check on	: NUMBER:	L P	AGE 180 /	195
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22	23 24 28b 28c	25 X 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						s
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	•				Committee	
Full Name (Last, First, Middle Initial) CITIZENS FOR STIVERS Mailing Address 2500 SHERWIN RD.				on ID: EXP:Babursement	:23778 Y Ž 0 Ŏ 6	Y
•	State Zip Code OH 43221		Amount of	Each Disburs		
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/	L		1000.0	00
Office Sought: House Disburse	ment For: 2008 Primary General Other (specify)	Туре				
Full Name (Last, First, Middle Initial) 3. COMMITTEE FOR JON M. PETERSON				on ID: EXP:B sbursement		Y
Mailing Address 178 HILLSIDE DRIVE			0 5	3 0	Ž 0 Ö 6	
DÉLAWARE	State Zip Code OH 43012		Amount of	Each Disburs	ement this F	-
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type			200.0	50
Office Sought: Senate President State: OH Disburse	ment For: 2006 Primary X General Other (specify)					
Full Name (Last, First, Middle Initial) COMMITTEE FOR LARRY FLOWERS			Date of Dis	on ID: EXP:B		V
Mailing Address 14 E. Gay St., 2nd Floor			05	30 /	Ý Ž0Ŏ6	
Columbus	State Zip Code OH 43215		Amount of	Each Disburs	ement this F	-
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type			300.0	50
Office Sought: X House Senate President State: OH District:	ment For: 2006 Primary X General Other (specify)	. , , , ,				
SUBTOTAL of Disbursements This Page (optional) .		>			1750.0	00
TOTAL This Period (last page this line number only)						

SCIEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s))K LINI heck or	= NUMBE	:K:	<u> </u>	AGE	181 / 1	95
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	23 28b	24 286	-	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)	and address of any political co	OHIIIII	iee io s	Olicit Corti	ibulions	TOTT SUCT	COITIIII	liee	
MEDGO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	ΓΕΕ (a.k.a.	Medco H	lealth P	AC)			
Full Name (Last, First, Middle Initial) A. COMMITTEE TO ELECT BILL HARRIS				Date	of Disbur				-
Mailing Address 1238 TOWNSHIP ROAD				0 ^M 5	W / B	30 /	20) Ó 6 Ĭ	
City ASHLAND	State Zip Code OH 44805			Amou	int of Eac	h Disburs			-
Purpose of Disbursement		01	1				10	00.00)
Candidate Name NON-FEDERAL CONTRIBUTION		Cateo Typ	gory/						
Office Sought: House Disburse Senate President State: OH District:	ment For: 2006 Primary X General Other (specify) ▼								
Full Name (Last, First, Middle Initial)				Trans	action II	D: EXP:E	3:23763	3	
3. COMMITTEE TO STATE REPRESENTAT	VE JOYCE BEATTY				of Disbur	D /	YY	Y * Y	7
Mailing Address 233 S. HIGH STREET				0 5		30	20) Ó 6 Ĭ	
City COLUMBUS	State Zip Code OH 43215			Amou	int of Eac	h Disburs	sement t	this Pe	riod
Purpose of Disbursement		01	1				7	'50.0C)
Candidate Name NON-FEDERAL CONTRIBUTION		Cateo Typ	gory/						
Senate President	ment For: 2006 Primary X General Other (specify)								
State: OH District: Full Name (Last, First, Middle Initial)				Tropo	ootion II	D: EXP:E	0.00766	2	
ELECT CLANCY COMMITTEE				Date	of Disbur	sement			
Mailing Address 3675 W. GALBRAITH RO	DAD # 16			0 [™] 5	M / D	30 /	ž	0 0 6	
City CINCINNATI	State Zip Code OH 45247			Amou	ınt of Eac	h Disburs	sement t	his Pe	riod
Purpose of Disbursement		0.4	,	L.			5	00.00)
Candidate Name NON-FEDERAL CONTRIBUTION		01 Cateo	gory/						
· —	ment For: 2008 Primary General Other (specify)								
SUBTOTAL of Disbursements This Page (optional)			•				22	50.00) ,
TOTAL This Period (last page this line number only)									
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SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)	-	NUMBER:	PAGE 182 / 195
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 23 28a 28b	24 25 26 28c X 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	·			
Full Name (Last, First, Middle Initial) FRIENDS OF GARY CATES Mailing Address 6542 SEMINOLE DRIVE	<u>.</u>		Date of Disburs	EXP:B:23765 sement
City WEST CHESTER	State Zip Code OH 45069		Amount of Each	n Disbursement this Period
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type		730.00
	ement For: 2008 Primary General Other (specify)			
Full Name (Last, First, Middle Initial) HOUSE DEMOCRATIC CAUCUS FUND			Date of Disburs	
Mailing Address 271 EAST STATE ST.			05 / 5	30 2006
City COLUMBUS	State Zip Code OH 43215		Amount of Each	n Disbursement this Period
Purpose of Disbursement		011		1000.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Office Sought: House Disburs Senate President State: OH District:	ement For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial) HUSTED FOR State Representative			Date of Disburs	
Mailing Address 148 SHERBROOKE DR	IVE		05 / 5	30 2006
City KETTERING	State Zip Code OH 45429		Amount of Each	n Disbursement this Period
Purpose of Disbursement		011		1000.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Office Sought: House Senate President State: OH District:	ement For: 2006 Primary X General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)				2750.00
TOTAL This Period (last page this line number only				

	CHEDULE B (FEC Form 3X)	Use sepe	erate schedule(s)		FOR LINE		₹:	Р	AGE 183	/ 195
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		(check onl 21b 27	y one) 22 28a	23 28b	24 28c	25 X 29	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name									ns
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	TICAL AC	TION COMMIT	TTE	≣ (a.k.a. I	Medco H	ealth P	AC)		
۹.	Full Name (Last, First, Middle Initial) OHIO REPUBLICAN HOUSE CAMPAIGN	COMMITT	ΓEE			Date o	f Disbur			
	Mailing Address 211 S. FIFTH STREET					0 5		30 /	žoŏ	6 1
		State OH	Zip Code 43215			Amour	nt of Eac	h Disburs	ement this	Period
	Purpose of Disbursement				011	L.			1500.	00
	Candidate Name NON-FEDERAL CONTRIBUTION				tegory/ Type					
	Office Sought: House Disburse Senate President State: OH District:	ement For: Primary Other (spe	General ecify) ▼							
3.	Full Name (Last, First, Middle Initial) OHIO REPUBLICAN SENATE CAMPAIGN	I COMMIT	TEE				action II f Disbur	D: EXP:B sement	:23775	
	Mailing Address 211 S. FIFTH STREET					0 ^M 5	/ D	30 /	žoŏ	6 ^Y
	,	State OH	Zip Code 43215			Amour	nt of Eac	h Disburs	ement this	Period
	Purpose of Disbursement				011				1500.	00
	Candidate Name NON-FEDERAL CONTRIBUTION				tegory/ Гуре					
	Senate President	ement For: Primary Other (spe	General ccify) ▼							
	State: OH District: Full Name (Last, First, Middle Initial)					Transa	action II	D: EXP:B	·23776	
Э.	OHIO SENATE DEMOCRATIC CAUCUS F	FUND				Date o	f Disbur	sement		Y
	Mailing Address 271 E. STATE STREET					0 5		3 0 /	žoŏ	6
		State OH	Zip Code 43215			Amour	nt of Eac	h Disburs	ement this	
	Purpose of Disbursement				011				1000.	00
	Candidate Name NON-FEDERAL CONTRIBUTION				tegory/ Type					
	Senate President	ement For: Primary Other (spe	General ecify) ▼							
	State: OH District:							•	4000	00
S	UBTOTAL of Disbursements This Page (optional) .				•		•	•	4000.	, ,
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NAME OF COMMITTEE (In Full)	and address of any political co	Jiiiiiii	100 30	Mich Contin	DULIONS II	OIII SUCII	COMMIN	lice	
MEDCO HEALTH SOLUTIONS INC. POLIT	TICAL ACTION COMMITT	ΓEE (a.k.a. I	Medco H	ealth P <i>A</i>	AC)			
Full Name (Last, First, Middle Initial)					action ID		:2378	0	
REDFERN 2006				M 5	f Disburs	ement 3 0	Y Y	Y	Υ
Mailing Address 3750 ROGER DR.				0.5	3	3 0	2 () Ó 6	
,	tate Zip Code OH 43452			Amoui	nt of Each	Disburs	ement	this Pe	eriod
Purpose of Disbursement	Г		-				. 4	100.0	0
Candidate Name		O1							
NON-FEDERAL CONTRIBUTION 2006		Categ Typ	-						
Office Sought: House Disburser Senate	nent For: Primary General								
President	Other (specify)								
State: OH District: GENER	AL 2006								
Full Name (Last, First, Middle Initial) 3- ASSEMBLY REPUBLICAN VICTORY '07					action ID of Disburs		:2381	0	
Molling Address DO DOV 454					/ / D	3 1	Y Y Y 2 () Ó 6	Y
Mailing Address PO BOX 154				0.0		ا لك		, , ,	
•	tate Zip Code NJ 08558			Amoui	nt of Each	Disburs	ement	this Pe	eriod
Purpose of Disbursement	I						30	0.00	0
Candidate Name		01 Categ							
NON-FEDERAL CONTRIBUTION		Тур	-						
Office Sought: House Disburser Senate	nent For: Primary General								
President	Other (specify) ▼								
State: NJ District: Full Name (Last, First, Middle Initial)				_		=>/==			
- ASSEMBLYMAN HERB CONOWAY					action ID of Disburs		:2378	4	
Mailing Address 907 MORGAN AVE.				0 ^M 5	/ D	3 1 /	Ý Ž (o ŏ 6	Y
	tate Zip Code			Amoun	nt of Each	Diabura		thia Da	
	NJ 08065			Amoul	il oi Eaci	Disburs	-		-
Purpose of Disbursement	Г	01	1				7	750.00	0
Candidate Name NON-FEDERAL CONTRIBUTION		Categ	ory/						
Office Sought: House Disburser									
	Primary X General Other (specify) ▼								
State: NJ District:	- \-								
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TOTAL This Period (last page this line number only).			•			• • •			

SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check or	E NUMBER		PAGE	185 / 19	95
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 28b	24 Z	25 29	26 30b
Any Information copied from such Reports and Statemers or for commercial purposes, other than using the name							
 NAME OF COMMITTEE (In Full) 	and address of any political co	mininuee 10 S	OHOIL COLILID	uu0115 110111 3	SUCIT CUITIII	III.LEE	
MEDCO HEALTH SOLUTIONS INC. POLIT	TICAL ACTION COMMITT	EE (a.k.a.	Medco He	alth PAC)			
Full Name (Last, First, Middle Initial) A. BARBARA BUONO FOR SENATE				ction ID: EX		33	
			Date of 0 5	Disburseme		0 0 6 °	1
Mailing Address 75 WOODBRIDGE AVE.			0.5	31	2	006	
	itate Zip Code NJ 08840		Amount	of Each Dis	bursement	this Per	riod
Purpose of Disbursement	I	• •	<u> </u>			500.00	
Candidate Name		011 Category/					
NON-FEDERAL CONTRIBUTION Office Sought: House Disburser	nent For: 2007	Туре	_				
·	Primary X General						
President State: NJ District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)			Transac	ction ID: EX	(P·B·2378	 R8	
BOB GORDON FOR ASSEMBLY			Date of	Disburseme	nt		
Mailing Address 654 PLAZA RD. NORTH			05	31	y y y	0 0 6 °	
•	itate Zip Code NJ 07410		Amount	of Each Dis	bursement	this Per	riod
Purpose of Disbursement		011	T L.			500.00	
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type					
Office Sought: House Disburser Senate President	nent For: 2007 Primary X General Other (specify)						
State: NJ District:	Other (specify)						
Full Name (Last, First, Middle Initial) BOB MARTIN FOR SENATE				ction ID: EX Disburseme		93	
Mailing Address P.O. BOX 3171			05	31	[/] 2	0 0 6 °	
•	itate Zip Code NJ 07760		Amount	of Each Dis	bursement	this Per	riod
Purpose of Disbursement	Г	011	T L.			500.00	
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type					
President	nent For: 2007 Primary X General Other (specify)						
State: NJ District:							
SUBTOTAL of Disbursements This Page (optional)		<u></u>			15	500.00	
TOTAL This Period (last page this line number only) .		•					

SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE (check only		PAGE 186 / 195
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 28a 28b	24 25 26 28c X 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMIT	TEE (a.k.a. M	ledco Health PAC)	
Full Name (Last, First, Middle Initial) 4. CONNERS FOR ASSEMBLY			Transaction ID: EX	ent
Mailing Address 907 MORGAN AVE			05 / 31	2006
City PALMYRA	State Zip Code NJ 08065		Amount of Each Dis	sbursement this Period
Purpose of Disbursement		011		750.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Senate President	ement For: 2007 Primary X General Other (specify)			
State: NJ District: Full Name (Last, First, Middle Initial) 3. DEMOCRATIC ASSEMBLY CAMPAIGN (COMMITTEE		Transaction ID: EX	
Mailing Address PO BOX 3712			05 / 31	
City TRENTON	State Zip Code NJ 08629		Amount of Each Di	sbursement this Period
Purpose of Disbursement		011		3500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: NJ District: Full Name (Last, First, Middle Initial)			Transaction ID: EX	XP·B·23796
DR. ERIC MUNOZ FOR ASSEMBLY			Date of Disburseme	ent
Mailing Address 121 OAK RIDGE AVE			05 7 3 1	['] 2006
City SUMIT	State Zip Code NJ 07901		Amount of Each Dis	sbursement this Period
Purpose of Disbursement		011		500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Senate President	ement For: 2007 Primary X General Other (specify)			
State: NJ District:				• • • • • • • • • • • • • • • • • • • •
SUBTOTAL of Disbursements This Page (optional)		>		4750.00
TOTAL This Period (last page this line number only	1			

SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check onl	: NUMBER:		PAGE 187	/ 195
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a		4 25 8c X 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political co	ommude to so	JIICIL CONTINDU	uons nom su	CH COMMINICE	,
MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	ΓΕΕ (a.k.a. l	Medco Hea	alth PAC)		
Full Name (Last, First, Middle Initial) 4. EFO JOAN QUIGLEY				tion ID: EXP	:B:23801	
Mailing Address 384 FAIRMOUNT AVE			0 5	['] 31 [']	y žoŏ	6 ^Y
,	State Zip Code NJ 07306		Amount	of Each Disbu	irsement this	Period
Purpose of Disbursement	ľ				500	.00
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type				
Office Sought: Senate President State: NJ Disburse	ment For: 2007 Primary X General Other (specify)	.,,,,,				
Full Name (Last, First, Middle Initial)			Transac	tion ID: EXP	:B:23787	
ELECTION FUND OF ALEX DECROCE				Disbursement		
Mailing Address 101 GIBRALTAR DRIVE,	SUITE 1B		0 5	31	y žoó	6 ^Y
,	State Zip Code NJ 07950		Amount	of Each Disbu		
Purpose of Disbursement		011	L		500	.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
Office Sought: House Disburse Senate President State: NJ District:	ment For: 2007 Primary X General Other (specify)					
Full Name (Last, First, Middle Initial)			Transaci	tion ID: EXP	·D·22000	
ELECTION FUND OF ASSEMBLYWOMAN	I CHARLOTTE VANDER\	/ALK		Disbursement		Y
Mailing Address 177 ROOSEVELT AVE			0 5	31/	žoó	6
,	State Zip Code NJ 07675		Amount	of Each Disbu	irsement this	Period
Purpose of Disbursement		011			500	.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
Office Sought: House Disburse Senate President State: NJ District:	ment For: 2007 Primary X General Other (specify)					
SUBTOTAL of Disbursements This Page (optional) .					1500	.00
TOTAL This Period (last page this line number only)						

SCHEDULE B (FEC Form 3X)	Use seperate sche		FOR LINE			PAGE 188	/ 195
ITEMIZED DISBURSEMENTS	for each category of Detailed Summary	of the	21b 27	22 28a	23 24 28b 28		26 30k
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na							IS
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL ACTION C	OMMITTE	EE (a.k.a. M	ledco Heal	th PAC)		
Full Name (Last, First, Middle Initial) 4. ELECTION FUND OF JOHN MCKEON I	FOR ASSEMBLY			Date of Di	on ID: EXP:		V
Mailing Address 7 WOODHULL AVENU	JE			05	31	žoŏe	3
City WEST ORANGE	State Zip Coo NJ 07052			Amount of	Each Disbur		
Purpose of Disbursement			011			500.	00
Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type				
Office Sought: House Disbut Senate President State: NJ District:	Primary X G Other (specify)	07 eneral					
Full Name (Last, First, Middle Initial) 3. ELECTION FUND OF KEVIN J. O'TOOL	E				on ID: EXP:l	B:23798	
Mailing Address PO BOX 125				0 5	31	[°] 2006	3 Y
City CLIFFSIDE PARK	State Zip Coo NJ 07010			Amount of	Each Disbur	sement this I	Period
Purpose of Disbursement			011			500.	00
Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type				
Senate President	rsement For: 200 Primary X G Other (specify)	07 eneral					
State: NJ District: Full Name (Last, First, Middle Initial)				Transacti	on ID: EXP:	3.23786	
ELECTION FUND OF NILSA CRUZ-PER	REZ				sbursement		V
Mailing Address PO BOX 3235				0 5	31	žoóe	6
City CAMDEN	State Zip Coo NJ 08101			Amount of	Each Disbur	sement this I	Period
Purpose of Disbursement			011			500.	00
Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type				
Senate President	rsement For: 200 Primary X G Other (specify)	07 eneral					
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	FOR LINE (check only		PAGE 189 / 195
	Detailed Summary Page	21b 27	22 23 28a 28b	24 25 26 28c X 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMIT	TEE (a.k.a. M	ledco Health PAC)	1
Full Name (Last, First, Middle Initial) A. ELECTION FUND OF PAUL A. SARLO			Transaction ID: EX	ent
Mailing Address 9 LINCOLN AVE			05 7 3 1	y žoó6°
City RUTHERFORD	State Zip Code NJ 07070		Amount of Each Di	sbursement this Period
Purpose of Disbursement		011		500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Office Sought: House Disburs Senate President State: NJ District:	ement For: 2007 Primary X General Other (specify) ▼			
Full Name (Last, First, Middle Initial) 3. ELECTION FUND OF ROBERT W. SING	ER		Transaction ID: EX	
Mailing Address 3 NORTH DAKOTA CT.			05 / 31	['] 2006
City JACKSON	State Zip Code NJ 08527		Amount of Each Di	sbursement this Period
Purpose of Disbursement		011		500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Office Sought: House Disburs Senate President	ement For: 2007 Primary X General Other (specify)			
State: NJ District: Full Name (Last, First, Middle Initial)			Transaction ID. C	VD.D.0070F
ELECTION FUND OF SENATOR HANK	MCNAMARA		Transaction ID: EX	ent
Mailing Address 187 PATTERSON AVE.			05 7 3 1	y žoó6°
City MIDLAND PARK	State Zip Code NJ 07432		Amount of Each Di	sbursement this Period
Purpose of Disbursement		011		500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Senate President	ement For: 2007 Primary X General Other (specify)			
State: NJ District:				
SUBTOTAL of Disbursements This Page (optional)		>		1500.00
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam												
V OI	NAME OF COMMITTEE (In Full)	le and address of any politica	COIII	1111	illee to s	Olicit Corit	ribut	10115 11	OIII S	uch cc	HIIIIIII	50	
\rangle	MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMI	TTE	Ε	(a.k.a.	Medco I	lea	th PA	AC)				
Α.	Full Name (Last, First, Middle Initial) ELECTION FUND OF SHEILA OLIVER					Date		isburs	emer	P:B:2		Y - ,	7
	Mailing Address PO BOX 376					o [™] 5		3	3 1		ž 0 (0 6	
	City MONTCLAIR	State Zip Code NJ 07042				Amou	ınt o	f Each	Disk	oursen			-
	Purpose of Disbursement			0	11	<u> </u>	-				50	0.00	0
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ /pe								
	Office Sought: House Disburs Senate President State: NJ District:	ement For: 2007 Primary X General Other (specify)											
В.	Full Name (Last, First, Middle Initial)									P:B:2	3803		
Ь.	FRIENDS OF DAVE RUSSO					M	of D	isburs	D	nt / Y	Y .	Υ ΄ ͺ ՝	7
	Mailing Address PO BOX 22					0.5		3	3 1		ž 0 (0 6	
	City MIDLAND PARK	State Zip Code NJ 07432				Amou	ınt o	f Each	Disk	oursen			-
	Purpose of Disbursement			0	11	L.		-			50	0.00)
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ /pe								
	Senate President	ement For: 2007 Primary X General Other (specify) ▼											
	State: NJ District: Full Name (Last, First, Middle Initial)					_				D D 0	0700		
C.	FRIENDS OF DIANE ALLEN							isburs		P:B:2		V * \	7
	Mailing Address 650 MYRTLE AVE.					0 5	IVI	′ _ ຶ 3	3 1		ž 0 (0 6	
	City THORFARE	State Zip Code NJ 08086				Amou	ınt o	f Each	Disk	oursen	ent th	is Pe	eriod
	Purpose of Disbursement			0	11						50	0.00)
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ /pe								
	Office Sought: House Disburs Senate President	ement For: 2007 Primary X General Other (specify)			•								
_	State: NJ District:												
s	UBTOTAL of Disbursements This Page (optional)				. •						150	0.00)
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SCHEDOLL B (I LOT OHII 3A)	Use seperate schedule(s)	(check only		GE 191 / 195
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 28a 28b 28c	25 26 X 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)	ne and address of any political co	orninillee to so	nicit contributions from Such c	Ommittee
MEDCO HEALTH SOLUTIONS INC. PO	LITICAL ACTION COMMITT	EE (a.k.a. N	Medco Health PAC)	
Full Name (Last, First, Middle Initial) FRIENDS OF RONALD L. RICE SENAT	E CAMPAIGN		Transaction ID: EXP:B:2 Date of Disbursement	23802
Mailing Address P.O. BOX 20037			0 5 M / 3 1 / Y	ž 0 0 6 °
City NEWARK	State Zip Code NJ 07101		Amount of Each Disburse	
Purpose of Disbursement	Г	0.1.1		500.00
Candidate Name NON-FEDERAL CONTRIBUTION	L _i	011 Category/ Type		
Office Sought: Senate President State: NJ District:	sement For: 2007 Primary X General Other (specify) ▼	,,		
Full Name (Last, First, Middle Initial)			Transaction ID: EXP:B:	23789
JERRY GREEN FOR ASSEMBLY			Date of Disbursement	V V V V
Mailing Address 1460 PROSPECT AVE			0 5 7 3 1 7	ž 0 0 6 °
City PLAINFIELD	State Zip Code NJ 07060		Amount of Each Disburse	ment this Period
Purpose of Disbursement	Г	044		500.00
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type		
Office Sought: House Disbut Senate President State: NJ District:	sement For: 2007 Primary X General Other (specify) ▼			
Full Name (Last, First, Middle Initial) JOE PENNACCHIO FOR ASSEMBLY			Transaction ID: EXP:B:2	23800
Mailing Address PO BOX 398			05 M / 31 / Y	2006
City CEDAR KNOLLS	State Zip Code NJ 07927		Amount of Each Disburse	ment this Period
Purpose of Disbursement	Γ	011		500.00
Candidate Name NON-FEDERAL CONTRIBUTION	L	Category/ Type		
Office Sought: Senate President State: NJ District:	sement For: 2007 Primary X General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)			1500.00
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ITEM	IIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a		23 28b	24 280	; X	25 29	26 30b
	ormation copied from such Reports and Statem										3
\ NAI	ME OF COMMITTEE (In Full) DCO HEALTH SOLUTIONS INC. POLI										
4. KA	Name (Last, First, Middle Initial) RCHER FOR SENATE ling Address 86 COURT ST.				Date		isburse	EXP:Bement		90 0 ŏ 6	Y
City FR		State Zip Code NJ 07728			Amo	ount c	of Each	Disburs	ement	t this P	eriod
Can	pose of Disbursement		Cat)11 tegory/						500.0	00
Offi	N-FEDERAL CONTRIBUTION ce Sought: House Senate President te: NJ District:	ment For: 2007 Primary X General Other (specify)	Т	уре							
	Name (Last, First, Middle Initial) DDEN FOR SENATE						ion ID:	EXP:B			V
Mai	ling Address P.O. BOX 4028				o [™] t	5 M	[′]	1 ′	Ż	0 Ď 6	
	IDONWOLD	State Zip Code NJ 08021			Amo	ount c	of Each	Disburs		t this P	-
Can	pose of Disbursement Indidate Name IN-FEDERAL CONTRIBUTION		Cat)11 tegory/ type			0		•	000.0	,0
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	Name (Last, First, Middle Initial) NZO FOR ASSEMBLY				1	of D	isburse	D (V
Mai	ling Address PO BOX 3945				O _v s	5 M	[′] 3	1 /	ž	0 Ď 6	Y
	RSEY CITY	State Zip Code NJ 07303			Amo	ount c	of Each	Disburs	-		-
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SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only	-		PAGE	193 / 195	5	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a				26 30b	
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name								
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political co	mininuee to so	iicit continbu	uons nom St	ICH COHIIIII	u cc		
MEDCO HEALTH SOLUTIONS INC. POLITIONS	FICAL ACTION COMMITT	EE (a.k.a. N	/ledco Hea	lth PAC)				
Full Name (Last, First, Middle Initial)				ion ID: EXF		9		
PANTER FOR ASSEMBLY				Date of Disbursement 05 2006				
Mailing Address 457 SYCAMORE AVE				3 1	2 (006		
City S SHREWSBURY	Amount of Each Disbursement this Period							
Purpose of Disbursement	NJ 07702				5	00.00		
Candidate Name		011						
NON-FEDERAL CONTRIBUTION	NON-FEDERAL CONTRIBUTION Type							
Office Sought: House Disburser Senate	ment For: 2007 Primary X General							
President	Other (specify)							
State: NJ District:								
Full Name (Last, First, Middle Initial) 3. SAM THOMPSON FOR ASSEMBLY				ion ID: EXF		6		
			05 31 Y 2006					
Mailing Address 5 LINCROFT AVE				<u> </u>		700		
•	State Zip Code NJ 08857		Amount o	of Each Disb	ursement t	his Period	i	
Purpose of Disbursement			L		5	00.00		
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NON-FEDERAL CONTRIBUTION	Category/ Type							
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SENATE DEMOCRATIC MAJORITY				i on ID: EXF isbursemen		3		
Mailing Address 194-196 WEST STATE S	Mailing Address 194-196 WEST STATE STREET			/ D 3 1	ÝŽ	0 0 6		
				(Factorial		lata Davida		
•	State Zip Code NJ 08608		Amount	of Each Disb			, 	
Purpose of Disbursement	Purpose of Disbursement 011				35	00.00	_	
Candidate Name NON-FEDERAL CONTRIBUTION								
Office Sought: House Disburser Senate	ment For: Primary General							
President	Other (specify)							
State: NJ District:							_	
SUBTOTAL of Disbursements This Page (optional)		<u></u>			45	00.00		
TOTAL This Period (last page this line number only)								

SCHEDULE B (FEC Form 3X)					OR LIN	E NUMBER: PAGE 194 / 195					
` ,		Use sepe	Use seperate schedule(s) for each category of the	1		aly one)					
"	EMIZED DISBURSEMENTS	Detailed S	Summary Page		21b 27	22 23 24 25 26 28a 28b 28c X 29 30b					
	y Information copied from such Reports and for commercial purposes, other than using th										
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)										
Α.	Full Name (Last, First, Middle Initial) SENATE REPUBLICAN MAJORITY					Transaction ID: EXP:B:23812 Date of Disbursement 0 5					
	Mailing Address 370 TALL TREE COURT					0 5 1 2 0 0 6					
	City JACKSON	State NJ	Zip Code 08527			Amount of Each Disbursement this Period					
	Purpose of Disbursement			01	1.	3000.00					
	Candidate Name NON-FEDERAL CONTRIBUTION			Cate Ty							
	Office Sought: House Di Senate President State: NJ District:	sbursement For: Primary Other (spe	General cify)								
В.	Full Name (Last, First, Middle Initial) VAN DREW FOR ASSEMBLY					Transaction ID: EXP:B:23807 Date of Disbursement					
	Mailing Address PO BOX 941					05 M / 31 / 2006 Y					
	City CAPE MAY COURT HOU	State NJ	Zip Code 08210			Amount of Each Disbursement this Period					
	Purpose of Disbursement			01	1	500.00					
	Candidate Name NON-FEDERAL CONTRIBUTION			Cate Typ							
	Senate President	sbursement For: Primary Other (spe	2007 X General cify) ▼								
	State: NJ District:										

SUBTOTAL of Disbursements This Page (optional)	•	3500.00
TOTAL This Period (last page this line number only)	•	39400.00

SCHEDULE D (FEC Form 3X)		(Use se	e separate PAGE 195 / 19					
			sched for e		FOR LINE NUMBER: (check only one) 9			
10				ed line)	(Check only one) X 10			
N	AME OF COMMITTEE (In Full)							
M	EDCO HEALTH SOLUTIONS INC. POLITIC	CAL ACTION COMMITTEE (a.k	.a. Medc	o Health	PAC)			
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NIELSEN, MERKSAMER, PARRINELLO, MUELLER, & NAYLOR, LLP			Nature of Debt (Purpose): LEGAL/ACCOUNTING FEES				
	Mailing Address 591 REDWOOD HIGHWAY., BLDG. 4000							
	City State MILL VALLEY CA							
	Outstanding Balance Beginning This Period			Transaction ID: PAY:D:24246				
	0.00							
	Amount Incurred This Period	Payment This Period	(Outstanding Balance at Close of This Period				
	1958.50	0.00	-		1958.50			
	SUBTOTALS This Period This Page (optional)		> _	0 0 0 0	1958.50			
[²)	TOTALS This Period (last page this line number of	лпу,	·		1300.00			

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)